Statutory Due Date 10/19/2002 Adjusted Due Date 10/21/2002

Received Date 10/22/2002

Postmark Date 10/21/2002

Amended 11/12/2004

# FORM DR-2: Disclosure Summary Page

Status: Amended ID #: 1361

Committee: People for Beall

Comm Type: State Senate
Date Due: 10/19/2002
Report Year: 2002

Treasurer: Linda Von Bank

Primary Ph. (515)576-2508 Secondary Ph. ()-

Chair: Ed O'Leary

Primary Ph. (515)573-5550 Secondary Ph. ()-

County: NA

Amended: 11/12/2004

## Statement of Cash on Hand

Cash on Hand at Start of Period	\$17,997.85
Schedule A: Cash contributions Total	\$28,653.00
Schedule F: Loans Received Total	\$0.00
Schedule H: Campaign Property Sales	\$0.00
SUB-TOTAL	\$46,650.85
Schedule B: Expenditure Total	\$31,595.81
Schedule F: Cash Loan Repayments	
Cash on Hand At End of Period	15,055.04

#### Additional Assets and Liabilities

Loans in Place at Start of Period	\$0.00
Schedule D: UnPaid Bills	\$0.00
Schedule E: In-Kind Contributions	\$6,741.83
Schedule F: Forgiven Loans	
Schedule F: Outstanding Loans	\$0.00
Schedule G: Consultant Breakdown?	No
Schedule H: Campaign Property Value	\$0.00

08/23/2002	#6019 C.W.A. Local 7102 Political Action Committee 3612 SW Ninth Street, Des Moines, IA 50315 (P):(515)-274-1877	\$200.00 check # 530	Ar
09/09/2002	#6334 Plumbers & Steamfitters Local Union #33 2501 Bell Ave, Des Moines, IA 50321- (P):(515)-243-3244(S):(515)-243-3244	\$100.00 check # 1134	Ar
09/12/2002	#6085 Iowa State Building & Trades Council PEC 2501 Bell Avenue, Des Moines, IA 50321 (P):(515)-243-3244(S):(515)-274-1711	\$100.00 check # 0739	Ar

DISCLASIBE SUMMADY DA	N		FORM	, , ,
DISCLOSURE SUMMARY PAC	L	orm	<b>DR-2</b> (Rev. 07/2003)	DISCLOSURE REPORT
COMMITTEE NAME (Must be same as on Statement of Orga	nization)		·	
PEOPLE LOK BEAU		_	For Office Use O	36/
IMPORTANT: Indicate type of committee you are reporting for:			Logged In	
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City	( 4 )County/Local Candidate Central Committee		Scanned	
CANDIDATE COMMITTEES ONLY:			Audited	
Candidate Name	Political Party	#**277 84	KERIOSE	MM. AR IT
DARYC BEALL	) EMDERAT	.   [	Discharia	ECCARD
Office Sought	District (if Senate or House	)	JUN 3	a 2004 - \$
SENATE	<u> </u>		500 3 ( 11 v	0 2004 2 C
Linda Von Bark	بر روس می است. در روس می است.		u/	, ,
	515.576.0	(2 O ) !	1. 0 Da	0404
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE		DATE S	SIGNED'
Late filed reports are subject t	o possible civil and cr	iminal	penalties.	
EE INSTRUCTIONS ON BACK AND COMPLETE THI	FOLLOWING SENTEN	CE:		•
AM FILING A	REPORT FOR AN/A (1) EL	ECTION	/(2)NON-ELEC	TION YEAR.
(report date)	Indicate one			
CHECK IF AMENDMENT TO REPORT DATED	t. 02	Local Co	ommittees, enter D	ate of Flection
		Local O	ommices, enc. D	die of Liectori
Check if this is final (termination) report and attach Notice of	Dissolution Form DR-3.	County &	& Local Committee	s, enter County in
(You must continue to file reports until a Notice of Diss		which El	lection is held	
STATEMENT	OF CASH ON HAND		***	
			<i>-</i> -	
ASH ON HAND at the beginning of the reporting period. (This by the committee. This amount MUST be the same as of the last reporting period, or must be zero if this is fire	s the cash on hand at the end	1	178	97.95
ADD TOTAL MONEY TAKEN IN THIS PERIOD	5/13 28,253.00			
Schedule A: Cash Contributions total (Attach Schedul	•		2	8,218,00
Schedule F: Loans Received total (Attach Schedule F				
Schedule H: Total Sales of Campaign Property (Attac				
(Schedule H applies to Candidates' Comm	ittees Only)			
	SUB-TO	ΓAL \$	;	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	5/B 31,654.11			
Schedule B: Expenditures total (Attach Schedule B) (1	· · · · · · · · · · · · · · · · · · ·	elow)	3,	1,712.74
Schedule F: Loan Repayments total (Attach Schedule	F)			
ASH ON HAND at the end of this reporting period (if final reporting period	ort, balance must	.//		
be zero) (Attach DR-3)	31B 14,596,7	\$	14	403,11
UNPAID BILLS (From Schedule D - Attach Schedule D)		2		
N KIND CONTRIBUTIONS (From Schedule E - Attach Schedu	ule E) 5/B 6683,5	53	64	0 83.53
OUTSTANDING LOANS (From Schedule F - Attach Schedule				0
ANDIDATE COMMITTEES ONLY:	· · · · · · · · · · · · · · · · · · ·	Ф		
ONSULTANT BREAKDOWN (Schedule G Attached?)			L	s No
ALUE OF CAMPAIGN PROPERTY (From Schedule H - Attac	h Schedule H\	\$		0
rede of ombediate from the (flos) of igning U Alfac		a)		<del>-</del>

#### **CONTRIBUTIONS - MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME	(Must be sa	me as on Statement of Organia	zation)
PEOPLE	FUR	BEALL	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

87/17/02	ID#	JUNN HAVE 1230-N. 11 DST FORT DODGE, ITA 5050/	!	s	
	ID#			50.00	
01/11/02	CK#	TAB ROMEON I BON 945 FT DODGE, IA JUSO/		50.00	/
07/18/02	ID# CK#	TOM TIBBITS 2948-19 WE WE FT DODGE, IA 5050/		250.00	
77/18/02	ID#	TOM DAWSON #338 301 BEANCH AV. #338 TEMPCE HICLS MD 20748		50.00	1
67/18/02	ID# CK#	MAKTY MINNIEK 413 AUSTIN ROCKWELL CLYY 50579		50.00	
0/1/02	ID# CK#	PANNE TISDEL 7327 KIMMEL ED 7327 KIMMEL ED		25.10	
57/14/02	ID# CK#	HEBERT JONAS 4SIZ CEDAR LAKE RD #2 ST LOUIS PK, MN 55416		25.00	
57/18/02		SHELLY ESCOBEDO 371-6-574 A/N. AT DODGE, AL SOSO/		25.00	/
08,263		PASS THE HAS	·	3.00	
1	ID# CK#				

528.00 SUB-TOTAL

TOTAL (If last page of this schedule)

Page / of 26 (for Schedule A)

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by arriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no amilial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	rme as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1	ID#	WILLIAM MAKEL STROH		s	
07/17/02	CK#	LUTTON 50561		25.00	
_	ID#	EARLEST DOBLEMESFELD			
57/0/62	CK#	7313 TWANA DR WBANDALE 50322		2.5.00	
	ID#	CARLY WINKEL PAUER 2885 - XENIA ANE			1
07/17/02	CK#	SOMERS SOSP		50.00	<i>\</i>
	ID#	PALLETTENONISON			
07/17/02	CK#	2236 ZEARING SOWERS 50586		5000	
Ĭ	ID#	ANDE RERSON			
07/17/02	CK#	241 N. TWIN CAKES RD MANSON 50563		50.00	V
	ID#	MARY COU NIMEDO			/
67/17/62	CK#	1411- N. 1648T 107. DOGGE, IA 80501		50.00	
	ID#	PADRICIA PUKACZ			,
07/17/02	CK#	PT DODGE, TA SOSO		50.00	
	ID#	MAKY BROWN			/
01/11/02	CK#	121 N. 2708T FT 0806E, 274 50501	·	50.00	
	ID#	UNN SIMPSON			
0/17/02	CK#	130 N. 25M ST PORT DODGE, IN 50501		180.10	
	ID#	da sacco.			
07/17/02	CK#	524-A.2874 ST #1 FT NODGE, IDA 50501		100.00	
0/11/100	<u> </u>	I PI NODOC, IN SUSO	SUB-TOTAL	- C(0 0)	

TOTAL (if last page of this schedule)

Page 2 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by arriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no namilial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS - MONEY TAKEN IN**

(including candidate's personal funds)	1,120.110
	CHECK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)	AMENDING FORM
PEOPLE FOR BEALL	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lower Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME	
08.13.02	ID# CK#	BEVERLY CEHMAN G PARK PL VERKERSON DO 1124		\$ 025.00		
. la	ID# CK#	PONALD MALBOD 2355- ZEARING AV SOMBRESSESSY		100.00		,
**. <b>A</b>	<sup>ID#</sup> 6684 ск# 627	TA STATE NAW-PAR 2700 S. LIVE LD STE 200 DES PLAINES, IL 60018		500,00	/	,
b	CK#	JOHN BELTZ 411 S. CHESTHUT JEFFERSON, IA 50129		35.00		Ŋ
	ID# CK#		·			
	ID# CK#					
	CK#					
	ID# CK#					
-	ID# CK#					
	ID# CK#					
		h (	SUB-TOTAL	- 16000		4

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by iage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no illal relationship, enter "not applicable" in the relationship column.

TOTAL (If last page of this schedule)

SCHEDULE

w 08/07\

**MONETARY** 

PECEINTO

# **CONTRIBUTIONS - MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME	(Must be sa	arme as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10.12.02	ID# CK#	COIS DENCKLAU 2021-N. 14th CT PT DODGE, IA 5050/		\$ 20.00	
10.12.02	ID# CK#	AHA! BEITZ.		40.00	
70	ID#	YIL S. CHESTAUT VEFFERSON IA SUIZG GRANUS CUDAMY	<u> </u>	40.00	
10.12.02		206 OLIVE ST JEFFERSON ITA 50129		25.00	
09.	ID#				
1	ID#				
	СК#				
	ID# CK#				
	ID#				
	CK#				
	СК#				
	ID#				
	CK#				
	CK#				
	<u> </u>		SUB-TOTAL	\$85.00	

Disclosure law requires candidate comments to the transport of committee. Relationship must be shown to the transport of control of the law and the control of the law and law

26 0/3

# **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLLIMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF INDING FORM

NEW

COMMITTEE NAME (Must be	same as	on Statement of Organization)
PEOPLE	FOR	BEALL

	COFCO	TOK DON'S		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
09.20.02	ID# 1361 CK# 2029	FEDNIMY PRINT + GRAPHICS 1109 CENTRAL AV PD 505001	CAMPAIGN SHIRTS	\$47382
09,20.02	1361	SENATE TRUMAN FUND 5661- FREUR DR FO 50501	CITERATURE	14.0000
10.08.02	136 l CK# <sub>208</sub> 9	PT DODGE MESSENGER 113 CENTRAL AVE PTDOGGE IA SOSOI	ADVERISING INSERT	25.00
	ID# CK#			
	ID# CK#			
	ID# CK#			,
	ID# CK#			
	ID#			

14,548,8) SUB-TOTAL \$ 145
TOTAL (if last page of this schedule) \$ 31,

# THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 56.6(3)(i).)

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Page	of	

# **EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

$\rho$	EDPLE FOR	R BEALL		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-01.02	ID# 1361 CK# Z076	WAITT OUTDOOR 1445 5.2360 PD 50501	BILLBOARD	\$ 5/0 00
(0.09.02	ID# (( CK# 2077	POSTMASTER	PISTAGE	144.80
	CK# 2078	CALHOUN CO. RECORDERS OFE ROCKHEU COY 50579	UIT	20.00
10.10.02	CK# 2014	GREENE CO' RECORDERS OFC. JEFFERSON, IA	CIST	5.00
10.09.62	ID# (1 CK# 2081	THEMESSENGER 713 CENTRAL PD SOSOI	AD INSERT	224.44
10.08.02	ID# (1 CK# 2080	POSTMASTER	POSTAGE	38.00
10.08.02	ID# () CK# 2083	WEBSTER CO RECORDER'S OFL PT. DODGE	LISTS	25.00
6.14.02	ID# CK# 2122	MESSENGER PRINTING 712-15 AV. S FD 50501	ENIEUR PES	14575

1114,99 SUB-TOTAL \$

\$ 11144

TOTAL (if last page of this schedule)

\$

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(I).)

Page \_\_\_\_\_\_\_ of \_\_\_\_\_\_

# **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLLIMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
CHEC	CK THIS BOX IF
AME	INDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

PE	OPLE FOR	BEALL			
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED	
39,19.02	1D# (361 -CK#2053	POSTMASTER	POSTAGE	\$ 38.81	
01,Zu.oz	L	HOR CENTRAL AV. FD 50501	PHONE &- CARUS	42.40	
6830.02	ID# 4 CK# ZOUZ	OFFICE MAX 2920 STH AN S FT, DODGE SOSOI	COMPUTER SUPPLIES	54.18	54
	CK# 2063	POSTMASTER	POSTAGE	68.40	ı
	CK# 2064	MENARDS 3319 50 AUS PD 50501	SIGN MATERIALS	588.43	
04.22.02	CK# 26065	11	ıı	134.86	v
09.23.02	2066	h	11	87.52	ν
09.23.02	ID# 1361 CK# 2068	<b>1</b> 5	<i>(1</i>	56.58	ţ.
			991.18 SUB-TOTAL	· \$ 991.88	/

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, politing, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. {Refer to Schedule G instructions and lows Code 56.6(3)(i).}

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Page		٠Æ	•	-	
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MU SCHEDULE

В
(Rev. 09/97)

MONETARY EXPENDITURES

CHECK THIS BOX IF AMENDING FORM

# **EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

09.24.02 CK# 2070 FD 50501  09.24.02 CK# 2070 FD 50501  09.24.02 CK# 2071  10# 11  09.24.02 CK# 2071  10# 11  09.24.02 CK# 2071  10# 11  09.24.02 CK# 2072  10# 11  09.24.02 CK# 2072  10# 11  09.24.02 CK# 2073	DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
09.24.02 CK# 2070 FD SOSO 1  10# 11  09.24.02 CK# 2071  10# 11  09.24.02 CK# 2072  10# 11  09.25.02 CK# 2074  10# 11  10#		2069		SIGN MATERIALS	\$ 19.05
09.24.02 CK# 2071 11 COPIES 87.45  09.24.02 CK# 2072 POSTMASTER POSTAGE 489.00  10# 11  09.25.02 CK# 2079 11  155.40  10# 11  09.25.02 CK# 2074 11  10# 11  10ANN BEALL  10.01.02 CK# 2121 FD 50501  10# MENARDS 3319-5MANS.  516N MATERIALS  41.41	09.24.02	H	2920-57 AV S	stationary supplies	25.39
04.24.02 CK# 2072 POSTMASTER POSTAGE 489.00  10# 11  09.25.02 CK# 2073 11  09.25.02 CK# 2014 11  10# 11  10.01.02 CK# 2121 FD 50501  10# MENARDS 3319-5THAV.S.  100.01.02 CK# 2075 FD 50501  100.01.02 CK# 2075 FD 50501	09.24.02	CK# 207 !	<i>[1</i>	Copies	87.45
09.25.02 CK# 2075 "  10# 11  09.25.02 CK# 2074	04.24.62	CK# 2072	POSTMASTER	POSTAGE	489.00
09.25.02 CK# 2074 U 74.00  10# 11 JUANN BEALL  [0.01.02 CK# 2121 FD 50501 FD 50501 FD 50501  10# MENARDS 3319-5MAN.S. SIGN MATERIALS  41.41			()	4	155.40
10.01.02 CK# 1928-A1.22 NOST FO SOSO1  10.01.02 CK# 1928-A1.22 NOST SUPPLIES FOR EMORAISER 177.72  10.01.02 CK# 3319-5 NAV.S. SIGN MATERIALS  09.27.07 CK# 2075 FD SOSO1	09.25.02	CK#	ιį	ł .	74.00
09.27.07 CK# 2075 FD 50501 SIGN MATERIALS 41.41	(0.01.02	ID# // CK# 2/2/	1928-1.220055	FOOD + FOOD-RELATED SUPPLIES FOR FUNDRAISER	177.72
	09.27.02	CK#			

SUB-TOTAL \$

TOTAL (if last page of this schedule)

1069.42

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be Inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page	4	of	6
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# **EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
CHEC	CK THIS BOX IF
AME	NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

PEOF	RE FOR :	BEAUL			
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbussment) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED	
10.14.02	,ID#  361 CK# 2123	DENCKLAU GRAPHICS SHICENTER ST BARNUM SUSIK	MAUNETIC SIGNS	\$ 58.30	
16.14.02	ID# " CK# 2030	CARTER PRINTING 1734 ELERAD AN DSM 50316	POST CAROS BINTONS	1142.12	
07,19.62		ECONOMY DEINT + GRAPHICS 1109 CENTRAC FD 50501	CAMPAION SHIRTS	19.50	
67.23.02	ID# 11 CK# 2022	SENATE TRUMAN AND S661 FLEUR DR D8M S0321	Polling / mar savary reimb.	6000.00	
07.24.02	ID# (1 CK# 2023	JIFI PRINT 2200 CENTRAL AN FD 5050)	VITER 10 CAROS	19395	
08.66.02	ID# CK# 2025	BOB BICKEN POB. 361 CALLOU 51401	PARADE CANOY	37474	
08.18.02	2021	CARTER PRINTING 1739-E GRAND Dom 50316	STATIONERY, BUNGER STICKERS	272430	
08,16,02	ID# 4 CK# 2026	4	BROCHURES	2500.54	

TOTAL (if last page of this schedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail iternized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lower Code 56.6(3)(i).)

91B 13,073,42

Page 5 of 6

SUB-TOTAL

# **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
_	CK THIS BOX IF

COMMITTEE NAME	(Must be	same as on	Statement	of Organization)
----------------	----------	------------	-----------	------------------

PEOI	DE FOR	BEALL		
DATE EXPENDED (MW/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08.16.02	20.30	WALMART ET DODGE IA 5050,	FUNDRAISER SUPPLIES	\$69.89
08.04.02		POSTMASTER  F. DODGE, IA SOSOI	PESTAGE	83.20
01.25.02	0000	OFFICE MAY G. DODGE, JA SOSO1	Office SupplyES	61.47
08.16.02		MINESOHNSON/HYDEE  FINDDGEITA SOSII	AUNDRAISER SUPPLIES	250.51
08:18:02		WALMART BIDODGE, JA SISO	FUNDRAISER SUPPLIES	20.88
08.01.02	ID#_1186 / CK# 2054	POSTMASTER FT. DODGE, FA 5050/	POSTAGE	370.00
* .	ID# / CK#			
	ID# CK#			

TOTAL (if last page of this schedule)

SUB-TOTAL

\$31,654.11

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

(for Schedule D)

CANDIDATE COMMITTEES NOTE:

incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM	FORM
	set Form DR-2 DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Organization)	(Rev. 07/2003) REPORT
PEOPLE FOR BEALL	For Office Use Only
	Comm. # 5 \( \text{\( \text{\) \}}}}}}} \end{\( \text{\( \text{\) \}}}} \end{\( \text{\( \text{\) \ext{\( \text{\( \text{\( \text{\( \text{\( \text{\( \text{\) \ext{\( \text{\( \text{\( \text{\) \ext{\( \text{\( \text{\) \ext{\( \text{\( \text{\) \ext{\( \text{\) \exitinity}}}}} \end{\( \text{\( \text{\) \ext{\( \text{\) \ext{\( \text{\) \ext{\( \text{\  \text{\  \ext{\  \exi}} \ext{\  \ext{\  \ext{\  \exi{\  \exi{\  \exi{\  \exi} \ext{\  \exi{\  \exi{\  \exi{\  \exi{\  \exi{\  \exi{\  \exi}\  \exi{\  \exi{\  \exi}\  \exi{\  \exi{\  \exi{\  \exi{\  \exi{\  \exi}}} \e
IMPORTANT: Indicate type of committee you are reporting for:	Scanned
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee	Computer WK
CANDIDATE COMMITTEES ONLY:	
Candidate Name Political Party  DEWO CLA	<del></del>
Office Sought District (if Senate or H	ouse) MAR 1 1 2004
SENATE 25	
Linde Worksunder ELEN	pm lleg
3/3.3/4	.2508 2.17.04
SIGNATURE OF TREASURER (or person filing this report)  TELEPHONE	DATE SIGNED
Late filed reports are subject to possible civil and	d criminal penalties.
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENT	ENCE:
I AM FILING A REPORT FOR AN/A (1	I) ELECTION /(2)NON-ELECTION YEAR.
(report date) Indicate one	
ECHECK IF AMENDMENT TO REPORT DATED 10.14.0 2	Local Committees, enter Date of Election
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3	County & Local Committees, enter County in which Election is held
(You must continue to file reports until a Notice of Dissolution is filed.)	
STATEMENT OF CASH ON HAM	ND
CASH ON HAND at the beginning of the reporting period. (This is the total of all monie	s held
by the committee. This amount MUST be the same as the cash on hand at the of the last reporting period, or must be zero if this is first report filed.)	e end 17877.85 —
ADD TOTAL MONEY TAKEN IN THIS PERIOD	26 215 45
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind b	
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
(Schedule H applies to Candidates' Committees Only)	111 462 65
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	ns below) 307/3.15
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loa	707/3,15
Schedule F: Loan Repayments total (Attach Schedule F)	
CASH ON HAND at the end of this reporting period (if final report, balance must	
be zero) (Attach DR-3)	<u>/5379.70</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)*  *IN-KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	, ,
CANDIDATE COMMITTEES ONLY:	
CONSULTANT BREAKDOWN (Schedule G Attached?)	Tyes No
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	me as on Statement	of Organization)	
PEOPLE	FUR	BEALL	•	

SCHEDULE A (Rev. 09/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
07/17/02	ID# CK#	JOHN HAVE 1230-N.1125T FORT DODGE TA SOSO/		\$ 50.00	/
07/17/02	ID# CK#	THE REMEDI I BONGST FT DODGE: ITA JOSO/		50.00	/
67/18/02	ID# CK#	TOM TIBBITS 2948-15 AVE NE FT DODGE, IA JUST		250.00	
07/18/02	ID# CK#	JOHN DAWSON #338 JOHN BRANCH AV. #338 TEMPRE HILLS MD 20748		50.00	1
57/18/02	ID# CK#	MARTY MINNIER  413 AUSTIN  ROCKWELL ROTY 50579		50.00	
5/1902	ID# CK#	PANNIE TISDEL 7327 KIMMEL ED CLAYTON AH.		.2510	
57/14/62	ID# CK#	HEBERT JONAX 4512 CEDAR LAKE RD #2 ST LOWIS PK. MN 55416		25.00	
57/18/02	ID# CK#	SHELLY ESCHEDO 3016-57 Al N. GE DODGE, IN 5050/		25.00	
	CK#				
	ID# CK#				

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consangulaity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surmame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page / of 26 (for Schedule A)

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME	(Must be sa	me as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
CHE	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
mlala	ID#	WILLIAM MAKER STROH		\$ 25.00	
07/17/02	ID#	LUTTON 50561		2,5,6,6	/
57/11/62		PARUET DOEKINGSFELD 7313 TWANA DK WEBANDALG SA322		2.5.00	/
07/17/02	ID# CK#	LARLY WINKEL PAUER 2PBS - XENIA ANE SOMMERS SOSPL		50.00	/
07/17/02	ID#	PAULETTE JOHNSON 2236 ZEADWIG SONLERS SUSSE		5000	/
0/17/02	ID# CK#	ANNE PERSON 2411 N. TWIN CAKES RD MANSON 50563	·	50.00	v
67/17/62	ID# CK#	MARY CON NIMEDO 1411 - N. 1648 ST		50.00	/
01/17/02	ID# CK#	PATRICIA PUKACZ 2021 - N. 1-4000 ET BODGETTA SOSO		50.00	1
0/11/02	CK#	MALY BROWN: 421 N. 2756T FT D806E, IA 50501		50.00	
0/17/02	ID# CK#	UNN SIMPSON 130 N, 25M ST PORT DODGE, IA 5050/		XM.H	
57/17/02	ID# CK#	WAR DRISSEL SE4-A. 2874 ST #1 AT DODGE: IA 50501		100.00	
			SUB-TOTAL	C(1.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 26 (for Schedule A)

## **CONTRIBUTIONS - MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME		ame as on Statement of On	ganization)
PEOPLE	FOR	BEALL	

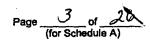
SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
onlaliz	ID# CK#	MARJORIE BEAU 420 KENYON RD FO DONGE JEAU 5050/	MARKER	\$ 250.00	
07/19/02	ID# CK#	PARICIA MARTIN 1140-1401 ST CLARE, TA SISZY		10.00	
07/17/02	ID# CK#	MARCIA TASLER SOZ BELLST CHURDAN, ITA SOOSO		10.00	
07/17/02	ID# CK#	CAURENCE NELSON 3407 IOUA NO GOWELEL IA SOSY3		20.00	
07/17/02	ID# CK#	DONALD MOELLER 346-2007 ST BOMERSIA 50586		05.00	/
ชา/เา/oz	CK#	VIRGINIA MIELER 3416-28021 ST SOMERS SOSPL		25.00	1
17/17/02	ID# CK#	MARTHA SIEFER 461 LOOMES FT DODGE FTA 50501		50.00	/
01/11/02	ID#	MARCIA NICHOLS 611 EMMA DES NOWES TA 50315		50.00	1
07/17/02	ID#	ANDE HILSABELK 2732-2011 AVEN ET DODGE, IA 5050/		25.00	1
67/17/02	ID# CK#	PRANCIS CADANY 200 N.OLIVE ST VEHERSON IA 50129		25.00	/
***************************************			SUB-TOTAL	· dann	

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.



# **CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME	(Must be se	ame as on Statement of	Organization)
PEOPLE	FOR	BEALL	·

SCHEDULE	MONETARY
(Rev. 06/97)	RECEIPTS
CHE	CK THIS BOX IF NDING FORM
1	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08.16.62	ID# 6021. CK# 1481	CLEDITUNION PAR 3737 WESTOWN PRUY W. DESMOINES LA 50265		\$ 100.00	
. 4	ID# CK#	JUDGE BROWN SIB-UMANS TODGES IN 50501		25,10	/
*. <b>K</b> *	ID# CK#	(ARRY JESSEN) 1322 - 289 AV N JET DODGE JA 50591		J5.08	1
и	ID# CK#	COIS DEACKLAND ZOZI N. 144 OT FT DODGE, JA SOBO/		25.00	
u .	ID# CK#	SHARI ATZGERALO 726 A. 3005- PT DODGE, ID-5050/		50 0	
и	ID# CK#	PT DODGE, IP 5050/ JOHN VAN DER CHUDEN POB 215 SPIRIT LAKE/ S1360		25.60	~
u	ID# CK#	LARRY LEITING N. 1913-121 ANE N. FT DODGE, FA 5650/		120.00	/
· a	ID# CK#	KENDERT/JOHNSON 2325-380=35 HARCOURT SUSYY		5000	
q ·	ID# CK#	SHILLE TRENT 2511-2212 AN N FT DODGE, TASOSO/		25.00	0
Ø	ID# CK#	DAN PULLAGO 1435-15 ANN. PT DODGE, IX SOSO/		25.00	
X	0110/	TOTAL (If last page	SUB-TOTAL of this schedule)	\$ 450.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguirily (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surmame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 4 of 26 (for Schedule A)

# **CONTRIBUTIONS - MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME	(Must be se	ame as on Statement of Organization)
PEOPLE	FUR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
CHE	CK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
8.14.02	ID# CK#	ARTHUR PALMER 918-15 ST NEGSTER CLTY, ID 50595		\$ 50.00	~
,	ID# CK#	BETTY PATTEN 926 S. DUFF MITCHELL, SD 57301		50.00	V
Ŋ	ID# CK#	DONALD CASSADY 1285-11-LAV. N FJ DODGE, JASOO /		50.00	
u	ID# CK#	TOM CARPSTAL.  1887 - H - ANE  UCRANTON 51462	·	250.00	/
α.	ID# CK#	EDDIE PETERSON 407-50. ASH HARCOURT SOSLY		100.00	1
Ü	ID# CK#	(ARLY DUSHMAN) 1197 COLONIAL DR PT DODGE IA 5050/		25.00	V
А	ID# CK#	POHER BROWD 3424-27045- SOMELS SOSPG		50.00	V
u	ID# CK#	ELMER PLINER 2064.21945T FT DODGE, IN 50501		25.00	U
Λ	ID# CK#	SC MARTIN 2438 BROADMOOR CT RAPID CITY 57702	·	50.00	
08.16.02	ID# 6046 CK# 3508	JUSTICE FOR ALL PAR 218-64 AU DES MOINES IA 50309	SUB-TOTAL	1080.50	

TOTAL (If last page of this schedule)

Page 5 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS - MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME	(Must be sa	ame as on Statement of Organization)
PEOPLE	FUR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
CHE	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MWDD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
816 - 2	ID#	ALICE SLOTTEN		\$	
8.16.02		07HO, IA 51569		25.00	
	ID#	WARLEN PAGE			<i>.</i>
. u	CK#	420 RENYON RD FT DODGO FA 6050/		25.00	
u'	ID#	POBERT REASSON			
۷	CK#	2336-774 AVE N. A DODGE, IA 6080/		25.00	
ا	ID#	WANDA SMITH.			
Ø	CK#	GOWRIE SUSK3		25.00	
•	ID#	SANDLA WILLS			
a .	CK#	3101-17 AN N 27 00065, IA 5050/		10.00	
	ID#	MICHELLE WRIGHT		100.00	
<i>U</i>	CK#	4712 ADMIRALTY DAY MARINA DEL ROY CA 90292		700.00	
11	ID#	CLOYD HERUM 1711 - N. 15TH ST		50.00	
U	CK#	FT DEDGE, IA 50561		30.00	
	ID#	PAMELA SANDERS 1127- N. 47451		04	
<i>(</i>	CK#	A DODGE IA SOSO/		50.00	
•	ID#	MARGARET, MASTY 3140-16 MASTY	STERMINTER -		
<i>A</i> .	CK#	F DODGE, TA JUSO/	N-CAW	50.00	
	ID#	LK BEARYHICC 1030 d. 1974 ST			1
U	CK#	PT DODGE IA 5050/		50.00	
			SUB-TOTAL	- dio 00	

TOTAL (if last page of this schedule)

Page 6 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affirity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME			
PEOPLE	FOR	BEALL	•

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
CHE	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 688.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MW/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08.10.02	ID#	PHACUS BIRD			
0	CK#	ROCKWELL CING, IA SOS79		25.00	
	ID#	JOHNNA FRIESTY			<del></del>
. 4	CK#	1312 DODGE CIRCLE FT DODGE, IA 5050/		25.00	0
٠.	ID#	RAYMOND RODEN!			
N,	CK#	2668-47 AU N ED 50501		25.00	~
	ID#	BAKBARA ERICKSON			
И	CK#	BIY WILL FOR SOSE!	Karana da karana	50.00	
	ID#	MRS HORACE LANTZ			
A .	CK#	2591 KENIA AVE SOMERS SOSPU		50,00	
	ID#	RICHARD LANSON			
ц	CK#	1206-N. 29# ST ET DODGE; FA 5050/		50.00	~
	ID#	CHERRY MARSDEN			
И	CK#	BO MISTING THE SUST 9		25.00	
	IO#	NEVA IMHOFF			
*	CK#	SOMERS STA SUSORO		25.00	V
	ID#	MIMAS SALVATORE			
ά :	CK#	1053-N. 2310 PL FTD00056; JA5050/		25.00	
	ID#	pan cod m & N			<del>                                     </del>
a	CK#	VILLY NATIONAL AV		25.00	~
-			SUB-TOTAL	22600	

TOTAL (if last page of this schedule)

Page 7 of 16 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	ame as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
CHE	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If spplicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
OS.10.02	ID# CK#	MRS. BELLIARD HAYDEN 1249. N. PIGST FT DODGE FA SOSO!		\$ 100.00	/
и	CK#	PADMANAINI REDDI 1611 - N. 114 ST FT. DODGE, FA 50501		100.00	/
ä,	ID# CK#	SHE DEAN 1112 IST ST GOWRIE, IA 50543		25.10	/
Á	CK#	LOCETTA TARBOX 1623-N. 24 ST PT DODGE, FA 5050/		50.00	/
,	CK#	GLORIA LAWLER 1209-N. 2525T IPT DEDGE, IA SOSO/		25.00	/
. 4	ID# CK#	PANCE SALMON 1844- PM ALE N FT DODGE, IA 50501		25.00	~
И	CK#	DRENE BROWN 623-N.2155- 1PT-0006C7 IA 50501		50.00	
U	ID#	JANET SECOR 1714 DARAGON AV. ET DOBGE, IA SOSO/		25.00	~
Á	ID#	SHARON SMUTH 317 AUGC FT DODGE, IA SOSO/	·	75.00	~
7	ID# CK#	MICHAEL DUTCHER 1800 RISKAL AVE FT DO.DGE, IN SOSO(	·	100.00	/
			SUB-TOTAL	(0/2)	1

TOTAL (If last page of this schedule)

Page 8 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

		ame as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 08/97)	MONETARY RECEIPTS
CHE	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
67.27.02	ID# CK#	JEANNENE COCREANE 4837-8645T NO.7 UKBANDALE, IA 503,20		\$ 25.10	V
u	ID# CK#	JUDY PAYMEN, 114 NOTH AVEN, ET. DODGEDSSON		20.00	
<i>6</i>	ID# 6060 CK# 2099	IA COMM. ON POLLED-AA-CIS BODO WALKOR, SIEA DSM 170503/7		2000.00	
N	10# 6429 CK# 168 1	HVY HIWAY PARE.  2415-INGGASOVE AVE  DBM, IA/50312-5233		500.00	
08.00.02	ID# CK#	DANIO GIDEL 423 CONFETST ROCCAPLLELOY, IA SOST9		100.00	-
d	ID# CK#	LICHARD STRUET 420 KENYON RD FT DODGE JA SOSOI		10.00	
્ય	ID# CK#	PALC ZECKER 2127-1015 HR ET DODGE ZA SOSO1		25.00	
p	ID# CK#	JOHN BELTZ 411 S. CIESTAUT VESTELSON IA SU129		35/10	
И	ID# CK#	ED OLEARY		250.00	
N	ID#	PT DODGE, ITA SOSO 1 104CE DEHRAN 1173 COLONIAL DR FT DODGE ITA SOSO 1		100.00	3
	X	Office County Co	SUB-TOTAL of this schedule)	\$3/15°	

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Page 9 of 26 (for Schedule A)

# **CONTRIBUTIONS - MONEY TAKEN IN**

(including candidate's personal funds)

		ame as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	VIFFOR FUND- RAISER INCOME
07.27.02	ID# CK#	PHUDLE WILSON 3030-107 AVN. Frooder TA SOSOI		\$ 20,00	
. И	ID#	PAUL BODSFIELD 1458-N.1124 82- PT. DODGE, DA SOSOI		20.00	
ν.,	ID# CK#	TOM SAWATORE 1053 N. 2362 PL PT. DODGE: IA SUSO!		20.00	
И	ID#	CINDA SMUTH 1631 NATIONAL AVE FT. DODGE : IA EOSOI		1000	~
и .	ID# CK#	MICHELLE WRIGHT 4712 ADMIRALT NAM MAKINA DER REY, CA 90192		100.00	/
4	ID# CK#	COLLEEN GOODWAN 524-15 AVE SOMERSITA BOSPLO		50.00	~
A	ID# CK#	LICENTER CONTRACT RD ROCCURENCE CONTRACTOR TO SOSTA		50.00	/
d	ID# CK#	STEVEN COOK 114-104 AVEN, ET DODGE, IA SOO!		25.00	~
ч	ID#	PHONDA KHANBERS 1645- 94 AVE N. FT. DODGE. IA 5050/		25.00	/
и	ID# CK#	DAVID OTT 2112-N. 294 ST PT. NOWE TA 5050/		Sa so	V
	X	TOTAL (If last page	SUB-TOTAL of this schedule)	\$ 460.00	

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 10 of 26 (for Schedule A)

## **CONTRIBUTIONS - MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME	(Must be sa	ame as on Statement of Organization)	
PEOPLE	FOR	BEALL	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
2216	ID# CK#	CRAIGH MARIAN JOHNSON 2504-19- AVE N FT DODGE, ITA SOSO! RON KUTERWAN		\$ 50.00	
7.27.02		FT DODGE, IA 50501		00.00	
. и	ID# CK#	BIS No 19 ST SOSO /		21,00	
	ID#	DEBORAN RUSSELL 2903 - 1871 AN N			. /
u*	CK#	2903-1871 AJ N P DEDGE (IA 5050)		وم روی	
	ID#	ACAHOLIKIMBERLY BEALL	DAUGHTER-		,
U	CK#	BUG WISNER DE SO702	IN-LAW	50.00	
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#	•			
	ID#				
	CK#				
	ID#				
	CK#	·		}	
			SUB-TOTAL	\$ 150.00	0

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TOTAL (If last page of this schedule)

Page // of 16 (for Schedule A)

#### **CONTRIBUTIONS - MONEY TAKEN IN**

(including candidate's personal funds)	
COMMITTEE NAME (Must be same as on Statement of Organization)	CHECK THIS BOX IF AMENDING FORM
PEOPLE FOR BEALL	

SCHEDULE

(Rev. 06/97)

MONETARY

**RECEIPTS** 

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE	PAC ID NUMBER	X NAME AND ADDRESS OF CONTRIBUTOR	DET ATTENDED UP	AMOUNT	-1 m
RECEIVED	(if applicable)	MAINE AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	RECEIVED	√ IF FOR FUND-
(MM/DD/YR)	AND PAC CHECK	17	(if applicable)	,,	RAISER
	NUMBER	, , /			INCOME
نم	ID#	KRISTY HYLLMER-PIERSON			
08/23/02	CK#	227-9THN.N		\$	
و مار هاده	CINA	PT 00016 & IN 50501 /	1	25.00	
	ID#	DANIEL BEDNIAR	<del> </del>		
		1367 - S. 2824 ST			V
, U	CK#			25.00	V
	ID#	PT 00066, IA 50501			
	10#	ARVID MUISMAN		1	
ч	CK#	705-NE. MICHAEL DE	}	20.00	
		ANKENY, 20 50021		100.00	
	ID#	JOYCE AUSBERGER			
4	CK#	987-PAVE		50.00	1
	CK#	JEFFERSON, IA 50129	1		
	ID#			<b></b>	
		CORINNE FLEMINDS			
+	CK#	1486- SOM AN A		25.00	l
	104	FIT DODGE/ IN SOSO!	<u> </u>		<del> </del>
,	1D# 9656	TA LETTER CARRIERS		1	Į.
h	CK#	COMMITTEE ON POLITICAL BOILE.		100.00	
	1007	POB. 111 MEDIAPOLISITA 52637		100.00	<u> </u>
	ID#				
	CK#		1		ł
	CNA				1
	ID#		1	1	1
l		1 /	1		1
I	CK#			1	
<u> </u>	ID#	1-/	<del> </del>	<del> </del>	4
	10#	1 /			
ŀ	CK#	1 /	1 .	}	,
1	ID#	1/	1	1	
ł	CK#				
	J. C.			1.	
<del></del>	Vali		SUB-TOTAL	2/1/2	
	A 1111	ritu Onle		\$245.PD	_

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page /2 of 24

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	ame as on Statement of Organization)	<del></del>
PEOPLE	FOR	BEALL	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
CHE	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MWDD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08.18.02	ID#	PETER POLOEDENEY ALGO - 1704 ST FT DORGE, ITA 50501		\$ 50.00	V
. 44	ID# CK#	ROBERT CHRY 3376-2400 ST DIMERS FSOSPL		50.00	/
4	ID# CK#	JON VOSSEY 1029-6-AN N. FT. DODGE SOSSI		25.00	
. <i>U</i>	CK#	THOMAS YELLOW BIZ-13 PLANE N FT DODGE, IM SOSOI		asor	/
h	ID# CK#	MRS KERMIT SMITH, IR 2327-20THANN ET DOUGE, IA 5050/		25.00	
G	ID# CK#	KEN+CATHY JOHNSON 225-3RDAST RINARDISOSSE	-	100.00	/
Ĺ	ID#	POBERT MEINICING 312 5.2145 FT DODGE, IA-50501		50.00	V
h	CK#	CHALLENE PEDERS OF 702-S. 317 ST FT. DODGE, IA 5050/		25.M	/
ч	ID# CK#	JANE BURLESON 207 CENTRAL FT RADOT TA SOSO/		5.00	
и	ID# CK#	MIKE JOHNSON 31 TIMBER RIDGE DR FAIRBURY, FL 61739		10.00	
			SUB-TOTAL	20(M)	

TOTAL (if last page of this schedule)

Page 13 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

# **CONTRIBUTIONS - MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NA	ME (Must be s	ame as on Statement of Organization)
PEOPL	E FOR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
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05.15.02	ID# CK#	MARLENE BROCKMAN 952-5.2611 ST F DODGE, IN 50501		\$ 10.0-0	/
્ ય	ID# CK#	MARUIN DIEK 1255 N. 11 ST ET DODGE, IA 50501		20.00	E
08.15.02	ID# CK#	CAWRENCE MCBARRY 600-5.12#15- FT DODGE, IA SOSO!		25.00	/
08.15.02	CK#	JUDY COSERIVE 231-N.2645TA JOSOI		25.00	~
l,	CK#	MARDITH SAMS 612 RAKEST OTHO ITA 50569		20.10	•
И	CK#	MRS ED DECKER 3213-5HAIN FT DODGE IN 50501		50.00	
. 4	ID# CK#	PAUL GREEN		25.00	
ц	ID#	MENIN SURREDER 1604.N. 234 ST ACT DIDGE, IA SOSO/		25.00	~
ч	ID# CK#	GOY N. 294 ST # 10		25.00	
ч	ID#	PLEYN SIMSEN 1036 S 1525T FT DODGE, IA SOSO/		25.00	
			SUB-TOTAL	\$ 250.00	

TOTAL (if last page of this schedule)

Page // of 26 (for Schedule A)

<sup>&</sup>quot;Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME	(Must be se	ame as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
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DATE RECEIVED (MW/DD/YR	AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
68.12.0	) ID# 0 <sup>2</sup> CK#	CAROL MESSERLY 3277-ITH AN AN FORT DODGE, IA 50501		\$ 25.00	./
(A	ID# CK#	SWORD PRICE 2016- PTL ALL AL NT DODGE, ITA 50501		50.00	1
u.	10# CK#	DEBORAN O'LEARY 2516 SANOLER DK DESS MOINES, ITA 50322		100.00	~
ч	ID# CK#	tim mon 3 JoHNSON PL PT DODGE, DA SOSO/		25.00	
u	ID# CK#	BORDON THOMAS POB 1619 PT. DODGE, IA 5050/		50.00	~
ų	ID#	PUTH EDWARDS 1909-701 AN N ET DOOGE, IA JOSO/		25.00	1
A	ID# CK#	RAMMOND HOPPONEN 524. N. ZYM #F G DODGE, IA SOSOI		25.00	/
И	ID#	BRENDA SORENSON 3541-251-57 SOMBRS, IN SOSPE		A5.00	V
ď	ID# CK#	CHLORIS SORENION STIMERS 50586	·	a5.10	/
И	ID# CK#	GENLGE LAWMAN SOI. 7 TH AN SOMERS SOSSIO		05.00	v
			SUB-TOTAL	-37.CM	

TOTAL (if last page of this schedule)

Page /S of 16 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

# **CONTRIBUTIONS - MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME	(Must be sa	ame as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 08/97)	MONETARY RECEIPTS
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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08.13.00	ID# CK#	BEVERLY CEHMAN G PARK PL JEPKERSON DOWN 24		\$ Q5.00	/
. И	ID# CK#	PODALO WALBOD 2355-ZEARING-AN SOMERS SEOSMY		100.00	/
	ID# 6684 CK# 627	JA STATE HAW-PAR 2700 S. LIVE LD STE 200 DES PLAINES, IL 600/K		501.M	/
	ID# CK#				
-	ID# CK#				
·	ID# CK#				
	CK#				
	ID# CK#				
	ID# CK#				
	CK#				
	* all	TOTAL (If last page	•	\$ 625.00 \$	

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Page /6 of 26 (for Schedule A)

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ror	Instructions.	- 2ee	васк	or rom

# **CONTRIBUTIONS - MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

PEOPLE FOR BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
CHE	CK THIS BOX IF
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08.27.02		TOWA DEALERS POB 65840 W. DES MOINES, IA 50265		\$ 100.00	
į ł	ID# 6064 CK# 1675	TA FORE PSZS TROUGLAS AV, STE 4F DES MOUNES, TA 50322		100.00	
и	ID# CK#	WM. RYAN 1874 IOWA AU. PT DINGE, TA SOSO/		200.00	
1	CK#	MARK RASMUSSEN POI WESTWOOD DR JEXTERSON, IA 50129		100.00	
ν 	ID# CK#	DENNIS BELTE 2232 DAWSON DR FT 2006E, IA 5058/		50.00	
d	CK#	CINDA KADING S866 CRABAPPLE LN JOHNSTON S0131		100.00	
ä	ID# CK#	GAIC ANN MCDERMOTT 715- PISGAH DL CANON CITY, CO 81212		100.00	
	ID#				
	ID# CK#				
	ID# CK#				
			SUB-TOTAL	. 250.00	

TOTAL (if last page of this schedule)

Page // of 26 (for Schedule A)

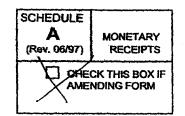
<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by harriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no samilial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS - MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

PEOPLE FOR BEALL



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09.05.02		STUART COCHRANE 1709 RIVERFOREST DR FTIDODGE SUSO1		\$ 50.00	
09.05.02	ID# CK#	HELEN JOHNSON 1536-20 AV. N FT DODGE, IA SOSO/		10.00	:
09.04.02	1443	ABATE 3118 - EASTERN AV. NE CEDAR RAPIDS 52402		250.00	
и	ID#	MARILYN MURPHY 1925-JE 82MD JT RUNNELLS 50237		20.00	
u	ID# CK#	PICHARD STARK, IR POB PGP PT DODGE, IM 50501		200.00	
	ID# CK#	TOM DAWSON 3001 BRANCH AND APT 338 TEMPLE HILLS, MD 20748		100.00	
	CK#	HEABERT CONLON 1636-1074 AV. N FT DODGE, JA SOSSI		50.00	
	CK#	CHARLES GUSTAFSON  2038 - 3184 STA SUSO/  PT DODGE TA SUSO/		150.00	
	ID# CK#	KENNETH MARTIN  3371 - 270 TO ST  BOMERS SOSEL		50.00	/
	ID# CK#	·			
	<u> </u>		SUB-TOTAL	000 00	<del>                                     </del>

TOTAL (if last page of this schedule)

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

# **CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME	(Must be s	ame as on Statement of Organization)	
PEOPLE	FOR	BEALL	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR FUND-
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)	, de Genere	RAISER INCOME
	10#12-8077	HEARTLAND COUNCIL OF USE CARPENTERS		s	
10.12.02	CK#535	218-15 AV. STERLING, IL 61081		1000.00	
	1D# 6021	CREDITURION PAC			<del></del>
10.12.02	CK# 1544	W.DES MUINCS, IA 50265		1500.00	
	1D# 30174	11600 066 6			
И	CK# 3347	NORTHERN DLAINS AFC-C10 SCHMABULGIL GU173		1000.00	
	1D# 8026	IBEW-COPE USE			[-
4	CK# 5294	1125.15 MST NW WASH. DC. 20005		500.00	,
,	ID# 6/13	ARCHE 1104A COUN. 61			
4	CK# 8175	4320 NW 200 AW DES MOINES = A 50313		250.00	
	1D# 6060	IA comm. ON POL. EDALAR. CIO			
υ	CK# 2139	DES MEDINES, IA 503/7		600.00	
	1D# 6#39	CWA LOCAL 7/02 3612.SW 92.ST			,
4	CK# 530	DES MOINES IA 503/5		200.00	
	1D# G139	COCAL 310 - WHITEO STEEL RUBBER			
И	CK# 2119	USES NO. BROADWAY -DSM SD313		100.00	
	10# .6095	IA STATE MACHINISTS			
4		DES MOINES IA 50317		250.00	
ч	ID#	CENTRAL IA BLOG+CINKT. TRADES			
•	СК# 3077	DES MEINES JA 58309		100.00	
			SUB-TOTAL	Con is	

TOTAL (if last page of this schedule)

Page 19 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by parriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no amilial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be se	ame as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
A26.02	<sup>,D#</sup> 6439 ск# 1970	CWA 369 CALLEGENIA ST WATERLOO IA 50703		\$ 200.00	
09.26.02	ID# 6478 CK# 1211	1BEW CICAL 1362. 370-BLAIRS FERRY RD NE CEDAR RAPIOS 52402		100.00	
4	CK#	LEAN HEATON POB 24 CANON CITY, CO 81215		50.00	
4	ID# CK#	THEODORE HELRICK 105 5.14 ST GRAND JUNGTION DA SO/07		25.00	
9	ID# 6291 CK# 2112	1HA 400 E GRAND AJ DES MOINES, TA 50309		500.00	,
ч	CK#	JAMES COWNIE 141-3721 ST DES MICINES, IA 503/2		500.00	
4	ID# 6019 ск. , 2047	JA 800. ATRY 525 - 5V 5 M ST, STE A DSM 50309 50309		100.00	
и	ID# 6429 CK# 1688	HEAVY HIGHWAY 2415-INGERSOCC AV 50312		500.00	·
4	ID# 6/18 Ск# 1842	IA COTOMETRIC ASSN 1454-30HAST W DES MUINES, IA 50266		200.00	
a	ID# CK#	AUEN BLUME 1524-12 HANIN FORT 0006 FI II+ 50501		100.00	
		0275	SUB-TOTAL	113600	•

Page 20 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by jarriage) (See Page 2 of forms pecket.). If surname of contributor is the same as candidate, but there is no amilial relationship, enter "not applicable" in the relationship column.

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE N	AME (Must be :	same as on Statement of Organization)	<del></del>
PEOPL	E FOR	BEALL	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
CHE	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees,

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
06.00 03	ID#	CAL. CO DEM. CENTRAL COMM		\$	
09.27.02	ск#	RUCKWELL CUTY 50579		300.00	
	ID#	MARTY MINNICK			
09.27.02	CK#	RECKNELL CITY INSUSIG		100.00	
·	ID#	RICHARD + EVEYN STELL			
09.27.0	-ск#	RICHARD + EVELYN STELL. 709 N. 14th ST. FOT DODGE, IN SOSOI		25.00	`
	ID#				
	СК#				
,	ID#			1	
	CK#				
	ID#				
	CK#				
	ID#				<u> </u>
	CK#				
	ID#				
	CK#				
	ID#		1		
	CK#				
	ID#		1	<b>†</b>	<del>                                     </del>
	CK#				
			SUB-TOTAL	45.00	1

TOTAL (if last page of this schedule)

Page 21 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by arriage) (See Page 2 of forms packet.). If sumame of contributor is the same as candidate, but there is no amilial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
PEOPLE FOR BEALL

SCHEDULE A (Rev. 06/97)	MÓNETARY RECEIPTS
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STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
(0. <b>ps</b> -02		OPERATING ENGINEERS COCAL 4880 HUBBELL 234 DES MOLVES. IA 50317	·	750.00	·
d	CK#	WEBSTER CO. WHEELERS 2361 S.1475 PT DODGE DA SOSO!	·	500.00	
4	1D# 6021 CK# 1577	CLEONTUNION PAC 3737 WESTOWN PRWY WIDESO MAINES IDA SOULS		1000.00	
L	CK# 3400	NORTHERN DIGINS AFTI-CIO 1699-E. WOODFIELD RO, STE 500-SCHAMBU	26-,IL	1010.00	
и	ID# 6356 CK# /174	PREEDOM PUND 60173 851-1974 ST DES MOINES, IA 50314		150.00	
ч	ID# CK#	MARGARET HASTY 3140-16TH AVE NO. FT. DEDGE, IA 5050/		25.00	
4	ID# CK#	JON VESSEY 1029-6TH AVE N. FT DODGE JA SOSO/		25.00	
4	ID# CK#	JOHN VAN DER LINDEN P.O. BOX 275 SPIRIT LAKE, 51360		25.00	
(	CK#	TOM CHRUSTAL 1887 - H - ANE 5CRHNTON ITA 51462		100.00	
	ID# CK#	CANCENCE MCCARY 6005. RMST SAC CITY IA 50583		100.00	·
			SUB-TOTAL	21000	

TOTAL (If last page of this schedule)

Page 22 of 26 (for Schedule A)

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

# CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

PEOPLE FOR BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
CHE	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MWDD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10.14.62	000	IPON WKRS LOCAL 67 ISOI E AUROLA AVE DES ADINES, IA 503/3		\$ 500.00	
10.08.03	7703	WELL PAC 634 GRAND AVE DES MOINES, IA 50309		250.00	
l'i	ID# CK#	CHARLES KROGMETER 905 NE. 3445T ANKENY IA 50021		100.00	
ν	ID# CK#	HERBERT BENNETT 704 CENTRAL AVE FT DODGO, IA 5050/		100.00	
u	ID# CK#	VERNON PATTERSON, LR. P.O.B. 426 FORT DODGE, IA 5050/		50.00	
K	ID# CK#	CONNIE NEESE 206 PERCIVAL RIPPEY, IA 50236		15.00	
u .	ID# CK#	DAVID GIDEL 423 COURT ST ROCKWELL CITY ITA 50579		100.00	
b	ID# CK#	PHICLIP GUNDERSON 1601 N. 15#ST FT DODGE, IA JOSOL		50.00	
и	ID# CK#	ROBERT SINGER 3257-5TH AVE N. 1PT DODGE, IA 5050/		50.00	
μ	CK# 2027	TA REALTORS PAC 1370-NON-114H ST \$100 CLIVE IA 50325	SUB-TOTAL	1000.00	

TOTAL (if last page of this schedule)

any relative making a contribution to the
blood relatives) and affinity (relatives by

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by arriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no amilial relationship, enter "not applicable" in the relationship column.

Page 23 of 26 (for Schedule A)

#### **CONTRIBUTIONS - MONEY TAKEN IN**

(including candidate's personal funds)

		ame as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
CHE	CK THIS BOX IF NDING FORM

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DATE RECEIVED (MIWDD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10.14.02	,D# CK#	CLARK ROOT 325 COIMLS AVE FT DODGE, IA SASO/		\$ 25.00	
10.14.02	ID# CK#	TITO TREVINO 1000 1660 PT. DODGO IN 5058/		100.00	
10.14.02	ID# CK#	LK BERRYHILL 1030 al. 1945T PT. DODGE, IA 5858/		50.00	
10.14.02	CK#	W. DEAN POLKING- 10425-15TAV N ATDODGE ITA 5050/		50.00	
10.14.62	ID# - CK#	JAMES RESTERSON 160 PARKWOOD CT FT DEDGE, IA SOSO!		100.00	
10.14.02	ID# CK#	MANCHE MCMAHON 1993 N. TYW LAKES RO MANSON 150563-7644		125.02	
ધ	ID# CK#	JANE CONDON  3081 - VALLEY AVE COHEVILLE EA 51453	,	25.00	
и	ID# CK#	MRS. KERMIT SMITH, 2327-20TH AVE N. PT DODGE, IDA 50501		30.00	·
И	10# 6080 ck# 793	TA POLINCAL ACTION FOR CANSIDATE ELECTION 4211 GRAND AVE - DSM 503/2		200.00	
4	ID# 6096 CK# /65 <b>2</b>	MANUFACTURED HOUSING PAC 1400 DEAN ANE DES MOINES, +A 50316	SUB-TOTAL	500.00	

TOTAL (if last page of this schedule)

Page 24 of 16 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by parriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no lamilial relationship, enter "not applicable" in the relationship column.

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	ame as on Statement of Organization)	***************************************
		BEALL	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10.14.02	<sup>ID#</sup> 6162 ск# 1262	TA AGRIBUSINESS EMPLOYCES PAC 900 DESMOINCS ST DES MOINES, IDA 50309		\$ 100.00	
μ	ID# CK#	SONDRA PRICE 2018-84 AVEN. FTI DODGE TA SOSO!		50,00	
u	ID# CK#	DELIRES GARST 1402-1275 AV. N. ATDODGE JA SOSO/		50.00	
и	ID#	GEORGE DEN HARTOG 211 N. 2014 ST FT DODGE TA 5050/		25.00	
υ	ID# CK#	PODERT PINGER 1989-NICOLE RD PUT DODGE TA 5050/		A5.10	
u	ID# CK#	ENMETT BASSETT 610 CARFIELD AVE FARMHAMULLE DA SOS38		25.00	
v	ID# CK#	D.B. NIMEOD. 1411 -N. 1672 ST ET DODGE, IN JOJO/		50.00	
А	ID# CK#	GORDON THOMAS POB 1619 FT DODGE IA 50501		100.00	
v	ID# CK#	MICHELLE WRIGHT 4712 ADMIRACTY WAY MARINA DEL REY, CA 90292		100.00	
4	ID# CK#	THEODORE HEARICK 795 5. 1474 GRAND INDICTION IA 1 50/07		108.00	
			SUB-TOTAL	12610	

TOTAL (if last page of this schedule)

Page 25 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by namiage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no amilial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAM	E (Must be sa	ame as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10.12.02	,ID# CK#	COIS DENCKLAU 2021-N. HELOT PT DODGE, IA SOSO/		\$ 20.00	
10.12.02	ID# CK#	JOHN BELTZ VII S. CHESTAUT UEFFERSON IA SO/29		40.00	
10.12.02		GRANUS CUDANY 206 OLIVE ST JEFFERSON ITA 50129		25.00	
\	ID#   CK#  -				
	ID# CK#				
	ID# CK#		·		
	ID# CK#				
	СК#				·
	CK#				
	CK#		SUB-TOTAL	BC 4 N	

TOTAL (if last page of this schedule)

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by parriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no amilial relationship, enter "not applicable" in the relationship column.

Page 26 of 26 (for Schedule A)

<b>FOR</b>	INSTRUCTIONS,	SEE BACK	OF FORM
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COMMITTEE NAME (M	st be same as on Statement of Organization)	7
PEOPLE	FOR BEALL	

SCHEDULE	
E	IN KIND
(Rev. 06/97)	CONTRIBUTIONS
***************************************	

CHECK THIS BOX IF AMENDING FORM

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DATE RECEIVED (MM/DD/YR)	NAME ĂND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
	NEW AMERICAN OPTIMISTS 236 - MASSACHUSETTS AVE NE. WASHUGTONDC 20002		PRINT + SHIP LITERATURE	\$ 1621.21	
04.30.02	IA DENOCRATIC DARTY (ID#9098)		POSTAGE + MAIL PRODUCTION	4149.00	
69.05.02	ISEA - PAC (10#6086) 777-369 ST DSM 50309		MEMBERSHIP DISKETTE	100.00	
03.01.02	Democratic Darty (ID#9098) SUBS FLEUR DR DSM 50321		CIMPUTER USE	3 mos @ 164.441mo 493.32	
08.15.02	MIKE+CATHY JOHNSON 31 TIMBER RIDGE DR ALRBURY. IL 61739		FOOD	220.00	V
08.15.02	IRU + DYAMU PIACA 603 MARGARET ST CALLENDER, IA 50523		FOOD	100.00	1
***************************************					
			SUB-TOTAL		

S/B 6683,53 TO

TOTAL (if last page of this schedule)

of **8**353

Page / of / (for Schedule E)

<sup>\*</sup>Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

COMMITTEE NAME (Must be same as on Statement of Organization)  PEOPLE FUR BEALL  INPORTANT: Indicate type of committee you are reporting for:  (1) Statement-of Committee (2) Statement of Organization)  PORTIANT: Indicate type of committee (3) Statement of Organization)  INPORTANT: Indicate type of committee (3) Statement of Organization  INPORTANT: Indicate type of committee (3) Statement of Organization  INPORTANT: Indicate type of committee (3) Statement of Organization  INPORTANT: Indicate type of committee (3) Statement of Organization  INPORTANT: Indicate type of committee (3) Statement of Organization  INPORTANT: Indicate type of committee (3) Statement of Committee  INPORTANT: Indicate type of committee (3) Statement of Committee  INPORTANT: Indicate type of committee (3) Statement of Committee  INPORTANT: Indicate type of committee (3) Statement of Committee  INPORTANT: Indicate type of committee (3) Statement of Committee  INPORTANT: Indicate type of Committee (3) Statement of Committee  INPORTANT: Indicate type of Committee (3) Statement of Committ	FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PA	.GE Reset Fo	em.	FORM DR-2	
Second					DISCLOSURE
INPORTANT: Indicate type of committee you are reporting for:  (1) Statewident appliedive Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Battic Issue/Franchise Committee (7) County/City Central Committee  (5) County PAC (6) Battic Issue/Franchise Committee (7) County/City Central Committee  (5) County PAC (6) Battic Issue/Franchise Committee (7) County/City Central Committee  CANDIDATE COMMITTEES ONLY:  Candidate Name  District (ff Senate or House)  SCHATE  District (ff Senate or House)  SCHATE  District (ff Senate or House)  DE M  District (ff Senate or House)  DE M  DISTRICTIONS ON BACK AND COMPLETE THE FIELD REPORTS Range from \$20 to \$800  SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:  AM FILING A  10.14.02  CREPORT FOR ANIA (1) ELECTION /(2) NON-ELECTION YEAR. Indicate one (7)  CREPORT FOR ANIA (1) ELECTION /(2) NON-ELECTION YEAR. Indicate one (7)  CREPORT FOR ANIA (1) ELECTION /(2) NON-ELECTION YEAR. Indicate one (7)  Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (report date)  STATEMENT OF CASH ON HAND  CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)  STATEMENT OF CASH ON HAND  CASH ON HAND at the beginning of the reporting period (Attach Schedule F).  OCUMY & Local Committees. enter County in which Election is held below)  Schedule F: Loans Received total (Attach Schedule F).  OCUMY & Local Committees. enter County in which Election is held.)  Schedule B: Expenditures total (Attach Schedule F).  OCUMY & Local Committees. enter County in which Election is held.)  Schedule B: Expenditures total (Attach Schedule F).  OCUMY & Local Committees.  OCUMY & L		ganization)	-	(Nev. 03/2002)	KEFOKI
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SUB-TOTAL\$  SUB-TOTAL\$  \$UB-TOTAL\$  \$UB-TOTAL	(Schedule H applies to Candidates' Cor	nmittees Only)			
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be zero) (Attach DR-3)	Schedule F: Loan Repayments total (Attach Sched	kule F)			<u> </u>
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	be zero) (Attach DR-3)	*******************************	\$	15,0	35 4 · 70

YES PNO

**CANDIDATE COMMITTEES ONLY:** 

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

For Ir	nstructio	ns. See	Back o	of Form

OCT 2 4 2002

#### **CONTRIBUTIONS - MONEY TAKEN IN**

(including candidate's personal funds)

COMMITTEE NAME	(Must be se	ame as on Statement of Organization)	
PEOPLE	FUR	BEALL	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
02/17/62	ID# CK#	JUAN HALE 1230-N.11255 FD 56501		50.00	/
07/17/02	ID# CK#	FOSOSOI		50.00	/
67/18/02	1U#	TOM TIBBITS 2948-15 AVE NE FO 50501		250.00	
07/18/02	ID# CK#	TOM DAWSON #334 301 BRANCH AV. #334 JEMPCEHICLS MD 26748		50.00	1
5/18/02	ID# CK#	MARTY MINNIER HIS AUSTIN ROCKWELL CATY 50579		50.00	
07/19/02	CK#	PANNIE TISDEL 7327 KIMMEL RD 7327 KIMMEL RD		.25.00	
57/14/02	CK#	HEARERT JONAS 4SIZ CEDAR CARE RD #2 ST LOUIS PK, MN 55416		25.00	
51/14/02 51/18/02	ID# CK#	SHELLY ESCUBEDO 3266-54AII. FD 50501		25.00	/
	ID# CK#				
	ID#				
			SUB-TOTAL	(0( 40)	

TOTAL (if last page of this schedule)

Page / of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

# **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	ame as on Statement of Organization)	, , , , , , , , , , , , , , , , , , , ,
PEOPLE	FOR	BEALL	

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
02/12/12	ID# CK#	WILLIAM HABER STROH		\$ 5.00	
07/17/02	ID#	LUTTON 50561	1		
67/11/62	CK#	PARKET DUEKINGSFELD 7313 TWANA DK WEBANDALG JUBAN	}	25.00	/
07/17/02	ID# CK#	CARLY WINKEL PAUER 2885 - XENIA ANE SOMERS 50584		50.00	/
07/17/02	ID# CK#	PAULETTE JOHNSON 2236 ZEARING SOWERS 50586		50.00	/
0/11/02	ID# CK#	ANDE PERSON 2411 N. TWIN CAKES RD MANSON 50563		50.00	V
07/17/02		MARY COU NIME OF 1411 - N. 1648 ST FD 50501		50.00	/
07/17/02	ID# CK#	PATRICIA PUKACZ 2021 - W. 1404 CT FD 50501		50.00	/
07/17/02	ID# CK#	MALY BROWN 421 N. 2791 ST ED 50501		50.00	/
0/17/02	ID# CK#	UNN SIMPSON 130 N. 25M ST FD 50501		(10.17)	
07/17/02	ID# CK#	WM DRISSEL 524-A.2874 ST #1 ED 50501		100.00	
			SUB-TOTAL	((0.00)	

TOTAL (if last page of this schedule)

Page 2 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	ame as on Statement of Organization)	
PEOPLE	FUR	BEALL	

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
onlalez	ID# CK#	MARJORIE BEALL 420 KENYON RD FD IA SOSOI	MOTHER	\$ 250.00	
07/19/02	ID# CK#	PATRICIA MARTIN 1140-14011 ST CLALE, TA SISZY		10.00	
07/17/02	ID# CK#	MARCIA TASLER 502 BELL 54 CHURDAN, IA 50050		10.00	
07/17/02	CK#	CAURENCE NELSON 3407 IONA AVE GOWEIE, IA SOS43		20.00	
07/17/02	014"	DONALD MOELLER 3416-28071 ST BOMERSIA 50586		25.00	/
ธา/เา/oz	CK#	VIRGINIA MOELLER 3416-280 M S- SOMERS SUSPL		25.00	1
07/17/02	CK#	MARTHA SIEFER 461 LOOMIS FD ITA SOSOI		50.00	✓
0/11/02	CK#	MARCIA NICHOLS 611 EMMA DSM 50315		50,00	/
07/17/02	CK#	ANNE HILSABEUK 2732 - 2014 ANEN FD 50501		25.00	✓
67/17/02	CK#	ARANUS CHOANY 2016 N.OLIVÉ ST VELPERSON IA 50/29	SUB-TOTAL	25.00	/

TOTAL (if last page of this schedule)

Page 3 of 26 (for Schedule A)

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# **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

		ame as on Statement of Organization)	
PEOPLE	FUR	BEALL	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08.16.62	ID# 6021.	CLEDITUNIONPAR 3737 - WESTOWN PRWY W. DSM 50265		\$ 130.00	
	ID# CK#	JUDGE BROWN 506. 4th ANS FD 50501		25.00	/
	ID# CK#	(ARRY JESSEN 1322-284 AU N FD 50301		25.00	
	ID# CK#	(OIS DEACKLAND 2021 N. 144 CT FD 50501		25.00	
	ID# CK#	SHARI ATZGERALO 726 A. 3RDST ED SOSO/		50.00	V
	ID# CK#	JOHN VAN DER CINDEN PUB 275 SPIRIT LAKE 51360		25.00	V
	ID# CK#	CARRY CEITING 1503-1271 AVE N. FD 50581		100.00	/
	ID# CK#	KENNETH JOHNSON 2325-3807 ST HARCOURT SUSYY		50.00	
	ID# CK#	SHIPLEE TREAT  2527. 22ND AN N  FD SUSO!		25.00	V
	ID# CK#	TRAN DUKING 1435-15 AVN. FD 50501		25.00	
			SUB-TOTAL	(0, 1)	

TOTAL (if last page of this schedule)

Page 4 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	me as on Statement of Organization)	
PEOPLE	FOR	BEALL	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	ARTHUR PAIMER			
	СК#	918-15 ST NEBSTER CLAY. IA 50595		50.00	
	ID#	BETTY PATTE N			U
	CK#	928 5 DUFF MITCHELL, SD 57301		50.00	
	ID#	DONALD CASSADY			
· .	СК#	1285 - 1174 AV N FD 50501		50.00	
	ID#	IOM CHRUSTAL			
	СК#	1887 - H - AVE SCRANTON 5/46.2		250.00	
	ID#	EDDIE PETERSON			
	CK#	407-50. ASH HARCOURT JOS44		100.00	1
	ID#	(ARRY DUSHMAN			
	CK#	1197 (OLDNIAL DR ED 5050/		25.00	
	ID#	ROVER BRAND			
	CK#	3424. 270 1 ST SOMERS SOSSE		50.00	<u></u>
	ID#	ELMER PLINER			
	CK#	2064.219th 5T FD 50501		25.00	~
	ID#	SCMARTIN			
	CK#	2438 BROADMOOR CT RAPID COMY 57702		50.00	
	1D# 6046	JUSTICE FOR ALL PAR			
08.16.02	CK# 3508	218-10H AU DSM 50309		1050.00	
			SUB-TOTAL	11 (0 110	

TOTAL (if last page of this schedule)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)	
COMMITTEE NAME (Must be same as on Statement of Organization)	CHECK THIS BOX IF AMENDING FORM
PEOPLE FOR BEALL	

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID# CK#	ALICE SLOTTEN		\$	
		OTHO, IA SISG9		25.00	
	ID#	WARREN PAIGE			
	CK#	420 KENYON RD FD 5050'		25.00	~
** · · · · · · · · · · · · · · · · · ·	ID#	PORERT REARSON			
	CK#	2336 - 774 ANE N. FD 50501		25.00	
	ID#	WANDA SMITH 1009 SUNRISE DR			
	CK#	GOWRIE SUS43		25.00	
	ID#	SALDRA ALICES			
	CK#	3101-177 AN N FD 50501		10.00	
	ID#	MICHELE WRIGHT		100.00	
	CK#	4712 ADMIRALTY WAY MARINA DEL REY CA 90292		700.00	
	ID#	CINTO HEDIUM		, , , , , ,	بي
	CK#	1711 - N. 15 H ST FD 5050/		50.00	
	ID#	PAMERA SANDERS			
	CK#	1127 - N. 47451- FD 5050/		50.00	
	ID#	MARGARET, HASTI 3140 - 16 M AV N	STEP MODIER -		
	CK#	13140 - 16 M AV N FD 5050 1	N-LAW	50.00	
	ID#	LK PERRYHICC			
	CK#	1030 d. 1974 ST FD 5050/		50,00	
			SUB-TOTAL	1	

TOTAL (if last page of this schedule)

SCHEDULE Α

(Rev. 06/97)

MONETARY

RECEIPTS

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)	(Rev. 06/97)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		K THIS BOX IF
PEOPLE FOR BEALL		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08.10.02	ID#	PHYCUS BIRD			
00.10.02	CK#	264 MAN 80579		\$ 25.00	
	ID#	JOHNNA FRIESTH			
,	CK#	1312 DODGE CIRCLE FD ITA SOSO1		25.00	C
	ID#	RAYMOND RODEN			
1.	CK#	2608-472 AU N ED 5050/		25.00	V
	ID#	BARBARA ERICKSON			
	CK#	814 N. 215I FD 50501		50.00	
	ID#	MRS HORACE LANT Z.			
	CK#	2591 YENIA AVE SOMERS SOSPL		50,00	
	ID#	PICHARD CANSON			
	CK#	1206-N. 29th ST FD. 50581		50.00	
	ID#	CHERRY MARSDEN			
	CK#	150 AUSTIN ST RC 50579		25.00	
	ID#	NEVA IMHOFF			
	CK#	SOMERS IN SUSOLO		25.00	
	ID#	THOMAS SALVATORE			
	CK#	1053-N. 23KD PL. FD 50501		25.00	
	ID#	ann toden AN			
	CK#	1/27 NATIONAL AV		25.00	
	· · · · · · · · · · · · · · · · · · ·		SUB-TOTAL	2./ 40	

TOTAL (if last page of this schedule)

Page 7 of 46 (for Schedule A)

**SCHEDULE** 

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#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)	(Rev. 00/97)	RECEIPTO
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF
PEOPLE FOR BEALL		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
CV.10.02	ID#	MRS. BERNARD HAYDEN 1249 N. YUST FD SOSOI		\$ 100.00	/
	ID# CK#	PADMANAINI REDDI 1611 - N. 11th ST PD SOSOI		100.00	/
** ;	ID# CK#	SHE DEAN 1112 IST ST GOWRIE, IA 50543		25.10	/
	ID# CK#	CORETTA TARBOX 1623 - N. 2412/ST FD 50501		50.00	~
	ID# CK#	66081A LAWLER 1209 - N. 2521 ST FD 50501		25.08	~
	ID# CK#	PANIC SALMON 1844-8MAEN. FD JA 50501		25.10	
	ID# CK#	TRENE BROWN 623-N.21555- FD 56501		50.00	~
	ID#	JANET SECOR 1714 DARAGON AV. PO SOSO!		25.00	/
	ID# CK#	SHARON SMITH 317 AVEC PD 50501		75.00	/
	ID# CK#	MICHAEL DUTCHER. 1808 RISKAL AVE FD 50501		100.00	/
	·		SUB-TOTAL	(2(1)	

TOTAL (if last page of this schedule)

Page Sof 26
(for Schedule A)

**SCHEDULE** 

(Pay 06/07)

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## **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	$\neg$
PEOPLE FOR BEALL	

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
_	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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1	DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR			·,
	RECEIVED	(if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT	√ IF FOR
	(MM/DD/YR)	AND PAC CHECK		(if applicable)	RECEIVED	FUND- RAISER
ı		NUMBER		(ii applicable)		INCOME
		ID#	JEANNENE COCHRANE			
	(2) 22 > -	CK#	4837-8645T NO.7		\$	
ı	67.27.02	CK#	URBANDALE, IA 50320		25.00	
1		ID#	JUDY PAYNE,		20.00	
1			114 NOTE AVE N.			
	U	CK#			20.00	
		10.4	KT. DOIXLE SOSO/		210	
	ŀ	ID# 6060	IA COMM. ON POL. ED-APL-CIO			
	$\nu$	ск# 2099	2000 WALKER, STEA		1012 02	
ı			DSM (ID 503/7	,	2010.00	
İ		1D# 6429	HVY HIWAY PAR			
	N	OKH	2415 - INGERSON ANE		ļ	] ;
ł		CK# /68 /	D8M, IA 503/2-5233		500.00	]
ı		ID#				
ł			DAVID GIDEL			
- [	08.00.12	CK#	423 COURT ST		100.00	
ŀ		15.4	ROCKARUCION, IA 50579		700.00	
ł		ID#	RICHARD STANEC 420 KENYON RD			
1	И	CK#	420 KENYON RD		10.00	
			FD IA 50501		70.00	
1		ID#	PAUL PECKER.			
ı	4	CK#	2727-1015HA		SCAX	
1	·	CN#	DITA 5001		75.00	
I		ID#				
ı	0		JOHN BELTZ			
ı		CK#	UNS CLESTIVAT JEFFERSON IA SU129		35.00	
ŀ		ID#	VEFFERIUN 14 00/29			
ı		IU#	ED OLEARY			
1	A .	CK#	1604 - N. 13Th ST		250.00	
			PDITH SUSSI		X30.00	
		ID#	JOYCE DEHAAN			
ı	U	CK#	1173 COLONIAL DR			
	j	UN#	FD 50501		100.00	
L	<del></del>		, 5 00007	OUD TOTAL		
				SUB-TOTAL	211540	

TOTAL (if last page of this schedule)

Page 9 of 26 (for Schedule A)

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# **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)	(Rev. 06/97) REC	EIPIS
COMMITTEE NAME (Must be same as on Statement of Organization)	CHECK THIS AMENDING F	
PEOPLE FOR BEALL		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
07.27.02	ID# CK#	PHYLLIS WILSON 3030-107 AVN. FTDODGE: IA SOSOI		\$ 20,00	i
и	ID# CK#	PAUL BOUSFIELD 1428-N.11 <sup>121</sup> ST FT. DODGE, IA SUSUI		20.00	
K	ID# CK#	TOM SALVATORE 153 N. 230 PL FT. DODGE, IA 5050/		20.00	
а	ID# CK#	LINDA SMUTH 163) NATIONAL AVE FT. DODGE I IA SOSOI		100,60	~
И	ID# CK#	MICHELLE WRIGHT 4712 ADMIRACTY WAY MARINA DEL REY, CA 90292		100.00	/
И	ID# CK#	COLLEEN GOODWIN 524-15 AVE SOMERS, IA SOSPL		50.00	V
И	ID# CK#	HAY PALMER 2169 THIN LAKES RD ROCKWELL CLYY, ZA 50579		50.00	/
il	ID# CK#	STEVEN COOK 114-10\$ AUE N. FT DODGE, IA SOSO!		25.00	V
d	ID# CK#	RHONDA CHAMBERS 1645-94 AVE N. FT. DODGE, IA 50501		25.00	/
и	ID# CK#	DAVID OTT 2112-N. 2974 ST FT. NODGE TA 5050/		50.00	V

TOTAL (if last page of this schedule)

Page /0 of 26 (for Schedule A)

SCHEDULE

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CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	(Rev. 06/97)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF
PEOPLE FOR BEALL		

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	CRAIG+ MARIAN JUHNSEN			
	СК#			50.00	رن
	ID#	RUN KITTERMAN			
	CK#			20,00	
	ID#	DEBORAN RUSSELL 2903 - IST AN N			
**	СК#	2903 - 1874 AN N PD 50501		30.00	
	ID#	andthat Will atter & Lengt	DALLATER		
	Ск#	BOOKSTAKIMBERLY BEALL 806 WISNER DK WATERLOO, IN 50702	IN-LAW	50.00	
	ID#	I STATE OF THE STA			
	CK#				
	ID#				<del></del>
	CK#				
	ID#				
	CK#	2			
	ID#				
	CK#				
	ID#				
•	CK#				
· · · · · · · · · · · · · · · · · · ·	ID#				
	CK#				
	<u> </u>	L	SUB-TOTAL	((, -1)	

TOTAL (if last page of this schedule)

SCHEDULE

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# **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)	(Rev. 06/97) RECEIPTS	<u>'</u>
COMMITTEE NAME (Must be same as on Statement of Organization)	CHECK THIS BOX I	F
PEOPLE FOR BEALL		

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	NUMBER ID#	KRISTY HILLMER-PIERSON			INCOME
08/23/02	СК#	227-9 MAN. N FD. IA 50501		25.00	/
	ID#	DANIEL BEDNAR			
V	CK#	1317 - S. 281 ST FD. IA 50501		25.00	V
	ID#	ARVID MUISMAN			
ч	CK#	705-NE. MICHAEL DR ANKENY. DA 50021		20.00	/
	ID#	JOYCE AUSBERGER			
4	CK#	987-PAVE JEFFERSON, IA SO/29		50.00	
	ID#	CORINNE FLEMING			
r	CK#	1486- 207 AN N		25.00	
h	ID# 9656	TA LETTER CARRIERS			
	CK# /007	POB. 111 MEDIAPOLISITA 52637		100.00	
	ID#				
	CK#				
	ID#				···
	CK#				
	ID#				
	CK#				į
	ID#				
	CK#				
			SUB-TOTAL	2 (( )	

TOTAL (if last page of this schedule)

**SCHEDULE** 

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	ame as on Statement of Organization)	٦
PEOPLE	FOR	BEALL	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08.18.02	ID#	ACTER ROUDE BUEH A493 - 1704 ST FD 50501		\$ 50.00	V
. ~4	ID# CK#	ROBERT LONRY 3376-240557 DIMERS 50586		50.00	~
ч	ID# CK#	JON VESSEY 1029-6+AN N. FT. DODGE SOS81		25.00	_
į.	ID# CK#	THOMAS KELLEY, 13-12 - 13 HAVE N FD 50501		2500	/
4	ID# CK#	MRS KERMIT SMITH, JR 2327-20THANN FDSOSO/		25.00	
C	ID# CK#	KENTCATHY JUMBON 225-3RD ST RINARD S0538		108.08	
l,	ID# CK#	FORERT MEINKING 312 5:21457 FD 50501		50.00	
h	ID#	CHARLENE PEDERS OF 70Z-S. 3NI ST FD SOSO/		25.M	
ч .	ID# CK#	JANE BURLESON 207 CENTRAL FD SOSO!		25.00	/
ч	ID# CK#	MIKE JOHNSON		10.00	
	<del>l</del>		SUB-TOTAL	20 ( M)	

TOTAL (if last page of this schedule)

Page 13 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	(Rev. 06/97)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF NDING FORM
PEOPLE FOR BEALL		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
05.15.02	ID# CK#	MAKLENE BROCKMAN 952-S.26MST FD 50501		\$ 10.00	
u	ID#	MARUIN DICK 1255 N. INLST		20.00	<b>E</b>
a (	ID#	FD. SOSOI CANTENCE MCDARTY 600-S.127 ST			
08.15.02	CK#	FD 50501		25.00	
08.15.02	CK#	JUDY COSGRIVE 231-N. 2645T FD 50501		25.00	V
l	CK#	MARDITH SAMS 612 RAKE ST OTHO 50569		20,00	/
И	ID# CK#	MRS ED BECKER 3213-5# AN N FD 50501		50.00	
и	ID# CK#	PAUL GREEN 1230 - 13th AN N FI) 5850		25.00	
И	ID#	MENIN SULRIGOER 1604.N. 23MD ST			
•1	CK#	FD SOSO /			
ν .	CK#	601 N. 284 5T # 10		25.00	
И	ID# CK#	EVELYN SOMSEN 1036 S 1525T FD 50501		25.00	
			SUB-TOTAL	250 00	

TOTAL (if last page of this schedule)

**SCHEDULE** 

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# **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be se	ame as on Statement of Organization)	
PEOPLE	FUR	BEALL	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08.12.02	ID#	CAROL MESSERLY 3277-45 AU N FD 50501		\$ 25.00	./
. "	ID# CK#	SINDRA PRICE 2018-871 AUN		50.00	~
ü	ID# CK#	DEBORAH O'LEARY 2516 SANDLER DK		100.00	V
и	ID# CK#	DSM 50322 LIM MOTE 3 JOHNSON PC FO 50501		25.00	
u	ID# CK#	GORDON THOMAS POB 1619 PO 50501		50.00	
ч	ID# CK#	PUTH EDWARDS 1909 - 7TH AN N PD 50501		25.00	V
И	ID# CK#	RAMMOND HOPPONEN 524-N. 2VII #P FD 50501		25.00	/
И	ID# CK#	BRENDA SORENSON 3541. 250 = 57 SIMERS, IA SOSPE		35.00	V
ų .	ID# CK#	CHLORIS SORENSON SIMERS 50586		25.10	/
И	ID# CK#	GEORGE LAWMAN SOI. 7 TH AN SOMERS SOSSE		AS. OD	V
		1 00000	SUB-TOTAL	20 ( M)	

TOTAL (if last page of this schedule)

Page /5 of 26 (for Schedule A)

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#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	ame as on Statement of Organization)	
PEOPLE	FUR	BEALL	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08.13.02	ID#	BEVERLY LEHMAN		\$	,
		6 PARK PL JEFFERSON 50124		25.00	
u	ID# CK#	RONALD WALBOD 2355-ZEARING AN SOMERS 50584		100.00	/
1	ID# 6084 Ск# 627	IA STATE NAW-PAR 2700 S. LIVE KD STE 200 DES PLAINES, IL 60018		500,00	/
	ID#	DEI PLATINE: 1 TE 40011			_ <del></del>
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#		<del> </del>		
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
į	CK#				
t	1		SUB-TOTAL	c/2500	

TOTAL (if last page of this schedule)

Page 16 of 26 (for Schedule A)

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#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)		
	☐ CHE	CK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)	. —	NDING FORM
PEOPLE FOR BEALL		

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08.27.02		IOWA DEALERS POB 65840 W.DSM.IA 50265		\$ 100.00	
,1	ID# 6064 CK# 1675	IA FORE PSZS DOUGLAS AV, SIE 48 DSM 50322		100.00	
и	ID# CK#	WM. RYAN 1874 IOWA AU. FD 50501		200.00	
٩	ID# CK#	MARK RASMUSSEN NOI WESTWOOD DR JEFFERSON, IA 50129		100.00	
V	ID#	DENNIS BERTE 2232 DAWSON DR FD SOSO/		50.00	
t!	ID#	CINDA KADING 5866 CRABAPPLE IN JOHNSTON 50131		100.00	
ų	ID# CK#	GAIL ANN MEDERMOIT 715- PISGAH DR. CANON CITY, CO 81212		100.00	
	ID# CK#				
	ID#				
	ID# CK#				
	<del></del>	<del></del>	SUB-TOTAL	· 250.00	

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TOTAL (if last page of this schedule)

SCHEDULE

(Rev. 06/97)

MONETARY

RECEIPTS

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)	(Rev. 06/97)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF
PEOPLE FOR BEALL		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
09.05.02		STUART COCHRANE 1709 RIVERFOREST DR FT. DODGE SUSO1		\$ 50.00	
09.05.02	ID# CK#	HELEN JOHNSON 1536-200 AV. N FD 50501		10.00	
04.04.02	ID# 6237 CK# 1445	ABATE 3118 - EASTERN AV. NE CEDAR RAPIDS 52402		250.00	
U	CK#	MARICYN MURPHY 1925-SE 82MD ST RUNNECCS 50237		20.00	
И	CK#	RICHARD STARK, IR POB 898 FD 5050/		200.00	
	ID# CK#	TOM DAWSON 3001 BRANCH AV APT 338 TEMPLE HILLS, MD 20748		100.00	
	ID# CK#	HEABERT CONCON 1636-1074 AV. N FD 50501		50.00	
	CK#	CHARLES GUSTAFSON 2038 - 31044 ST FD 50501		150.00	/
	CK#	KENNETH MARTIN 3371-270 ST BOMERS SOSSY		50.00	
	ID#   CK#				
			SUB-TOTAL	080 00	

TOTAL (if last page of this schedule)

SCHEDULE

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#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	me as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS		
CHECK THIS BOX IF AMENDING FORM			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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İ	DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	17.12.02	ID#JL-5017 CK#535	HEARTLAND COUNCIL OF USE CARPENTERS 218-155 AV. STERLING. IL 61081		\$ 1000.00	
	10.12.02	1D# 6021 CK# 1544	CREDITUNION PAC 3737 WESTOWN PKWY W.DSM 50265		1500.00	
	и	ID# 30174 CK# 3347	NORTHERN DLAINS AFC-C10 SCHAUNBURG IL 60173		1000.00	
	v	ID# 8026 CK# 5294	IBEW-COPE USR 1125-1575 WW WASH. DC. 20005		500.00	
1	4	ID# 6/13 CK# 3/75	AFFICIME /104A COUN. 61 4320 NW 2ND AN DSM 50313		250.00	
	U	ID# 6060 CK# 2139	TA COMM. ON POL. EDIR. AR.CIO 200 WALVER, STEA OSM 50317		600.00	
V	7	ID# <b>6439</b> CK#. 530	CWA LOCAL 7/02 3612.SW 92 ST DSM 50315		200.00	
レ	А	ID# G139 CK# 2119	WELLS 10 - UNITED STEEL/RUBBER WELLS 125 NO. BROAD WAY -DSM 50313		100.00	
V	ч	ID# 6095 CK# 461	IA STATE MACHINISTS 200 WALKER DSM 50317	 	250.00	
	ч	ID# CK# 3077	CENTRAL IA BLOG+CANST. TRADES TOB 7310 DSM 50309		100.00	
				SUB-TOTAL	~ 5500 HD	

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Page /9 of 26 (for Schedule A)

TOTAL (if last page of this schedule)

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)	(Rev. 06/97)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		ECK THIS BOX IF
PEOPLE FOR BEALL		·

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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	DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
$\mathcal{V}$	0926.02	ID# 6439 CK# 1970	CWA 369 CALLEGENIA ST WATERLOO 50703		\$ 200.00	
	09.26.02	ID# 6478 CK#/211	IBEW WEAR 1362 370-BLAIRS FERRY RD WE CEDAR RAPIDS 52402		100.00	
	4	ID# CK#	JEAN HEATON POB 24 CANON CITY CO 81215		50.00	
	ч	ID# CK#	THEODORE HERRICK 105 S.1445T GRAND JUNCTION 50107		25.00	
V	4	ID# 6291 CK# 2112	1HA 400 E GRAND AU DSM 50309		500.00	
	ч	ID# CK#	JAMES COWNIE 141.377 ST DSM 50312		500.00	
V	4	ID# 6019 CK , 2047	JA ADLATRY 525 - SUSM ST, STE A DSM 50309		100.00	
ン	и	ID# 6429 CK# 1688	HEAVY HIGHWAY 2415-INDERSOLL AV DSM 50312		500.00	
し	٩	ID# 6/18 CK# 1842	TA OPTOMETRIC ASSN 1454-30HUST WDSM 50266		200.00	
	И	ID# CK#	ALLEN BLUME 1524-12 HAVIN PD 50501		100.00	
				SUB-TOTAL	0 122500	

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Page 20 of 26 (for Schedule A)

TOTAL (if last page of this schedule)

SCHEDULE

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	ame as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
,	CK THIS BOX IF NDING FORM

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
04.27.02	ID# CK#	CAL. CO DEM. CENTRAL COMM RUCKWELL CLAY 50579		\$ 300.00	
09.27.02	ID#	MARTY MINNICK 413 AUSTEN			
	ID#	RC 50579		100.00	
09.27.0	CK#	PICHARD + EVELYN STELL 709 N. IYE ST. FO SUSO 1		25.00	
	СК#				
	ID# CK#				
	ID#				
	CK#				
	CK#				
	CK#				
	ID# CK#				
	ID#				
L	CK#		SUB-TOTAL	· 425.00	

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TOTAL (if last page of this schedule)

Page 21 of 26 (for Schedule A)

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	nme as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS	
CHECK THIS BOX IF AMENDING FORM		

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	DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	(0. <b>ps</b> -02	ID# 6089 CK# 228	OPERATING ENGINEERS COCAL 4880 HUBBECL 234 DSM 50317		\$ 750.00	
1	ď	ID# CK#	WEBSTER CO. WHEELERS 2361 S.1-5 FT PD SOSO;		500.00	
	વ	ID# 6021 CK# 1577	CREDITUNION DAG 3137 WESTOUN PRWY WIDSM		1000.00	
	u	CK# 3400	NORTHERN DIGINS AFC-CIO 1699. E. WOODFIELD RO, STE 500-SCHAMBIN	l6-,IL	1000.00	
	и	ID# 6356 CK# 1174	PREEDOM PUND 60173 851-1975 ST DSM 50314		150.00	
	ч	CK#	MARCARET HASTY 3140-16TH AVE NO. ED 50501		25.00	
	ч	ID# CK#	JON VESSEY 1029 - 6TH ANE N. PD SUSOI		25.00	
	4	ID# CK#	JOHN VAN DER LINDEN P.U. BOX 215 SPIRIT LAKE 5/360		25.00	
	(	ID# CK#	TOIM CHRYSTAC 1887 - H - AVE SCRHNTON 51462		100.00	
		ID# CK#	LAWRENCE MCCARTY GOOS. IZM SIT SAC CITY 50583		100.00	
				SUB-TOTAL	e 367500	

TOTAL (if last page of this schedule)

Page 22 of 26 (for Schedule A)

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#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	ame as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

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	DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1	10.14.62	ID# 6148 CK# 853	IPON WKRS LOCAL 67 ISDI E. AURORA AVE DSM 50313		\$ 500.00	
	10.08.03	ID# 6498 CK# //05	WELL PAC 636 GRAND AVE DSM 50309		250.00	
	//	ID# CK#	CHARLES KROUMEIER 905 NE. 34H ST ANKENY 50021		100.00	
	ν	CK#	HERBERT BENNETT 704 CENTRAL AVE FD 50501		100.00	
	U	ID# CK#	VERNON PATTERSON, IR. P.O.B. 426 FD 50501		50.00	
	) د	ID# CK#	CENNIE NEESE 206 PERCIVAL RIPPEY, IA 50236		15.00	
	Ų	ID# CK#	DAVID GIDEL 423 COURT ST ROCKWELL CTTY 50579		100.00	
	υ	ID# CK#	PHILLIP GUNDERSON 1601 N. 15TH ST FD 50501		50.00	
	и	ID# CK#	ROBERT SINGER 3257 - STY ANE N. FD SOSO1		50.00	
1	/1	ID# 6/25 CK# 2027	TA REALTORS PAC. 1370-NW-1144 ST #100 CLINE 50325		1000.00	:

TOTAL (if last page of this schedule)

Page 23 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME	(Must be sa	me as on Statement of Organization)
PEOPLE	FOR	BEALL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
1	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10.14.02	ID# CK#	CLARK ROOT 325 COOMES AVE 60 50501		\$ 25.00	
10.14.02	ID# CK#	TITO TREVINO NB 1680 FD 50501		100.00	
10:14.02	ID# CK#	LK BERRYHILL 1030 N. 1974 ST FD 50501		50.00	
10.14.02	ID# CK#	W. DEAN POLKING- 1435-1ST AU N ED 50501		50.00	
10.14.62	ID# CK#	JAMES RESTERSON 160 PARKWOOD CT FD 50501		100.00	
10.14.02	ID# CK#	PLANCHE MEMAHON 1993 N. TWIN LAKES 20 MANSON 50563. 7644		125.02	
c;	ID# CK#	JANE CONDON 3081 - VALLEY AVE COMEVILLE 51453		25.00	
и	ID# CK#	MRS. KERNUT SMITH 2327 - 20TH AVE N. CD 50501		30.00	
и	ID# 6080 CK# 793	TA POLINCAL ACTION FOR CANSIDATE ELECTION 4211 GRAND AVE - DSM 503/2		200.00	
ч	ID# 6096 CK# 165 <b>3</b>	IMANUFACTURED HOUSING PAC 1400 DEPAN ANTE DSM 50316		500,00	
			SUB-TOTAL	2121500	<del></del>

TOTAL (if last page of this schedule)

Page 24 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)						
PEOPLE	FOR	BEALL				

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10.14.02	1000	IA AGRIBULINESS EMPLOYCES PAC 900 DESMOINES ST DSM 50309		\$ 100.00	
И	ID# CK#	SONORA PRICE 2018-87 AVEN. Fr. DODGE 50501		50,00	
и	ID#	DECORES GARST 1402-1214 AV. N. FT DODGE SOSO/		50.00	
и	ID# CK#	GEORGE DEN HARTOG 211 N. ZOTH ST FT D. 50501		25.00	
υ	ID# CK#	RODERT PINGE C 1989 - NICCLE RD FD 5050 1		35.00	
и	ID# CK#	ENMETT BASSETT 610 GARFIELD AVE FARNHAMUILLE 50538		25.80	
v	ID#	D.B. NIMROD 1411 - N. 16TH ST PD 50501		50.00	
vl	ID# CK#	GORDON THOMAS POB 1619 FD 50501		100.00	
CI	ID# CK#	MICHELVE WRIGHT 4712 ADMIRACTY WAY MARINA DEL REY, CA 90292		100.00	
ч	ID# CK#	THEODORE HERRICK 795 5.1474 GRAND JUNCTION 50107		108.00	
			SUB-TOTAL	(261)	

TOTAL (if last page of this schedule)

Page 35 of 26 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)	(Rev. 06/97)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF NDING FORM
PEOPLE FOR BEALL	<u> </u>	·

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10.12.02	ID# CK#	COIS DENCKLAU 2021-N.14MCT FD 50501		\$ 20.02	
10.12.02	ID# CK#	JOHN BECTZ YII S. CHESTONUT JEFFERSON 50129		40.00	
10.12.02	ID# CK#	FRANCIS CUDAHY 206 OLIVE ST JEFFERSON 50/29		25.00	
	ID# CK#				·
	<del>'</del>		SUB-TOTAL	2510	

TOTAL (if last page of this schedule)

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 26 of 26 (for Schedule A)

SCHEDULE

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF

	COMMITTE	ENAME (Must be s	same as on Statement of Organization)			
	P	EOPLE.	FOR BEALL			
	DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANS		AMOUNT EXPENDED
	04.20,02	ID# 1361 CK# 2024	ECONOMY PRINT + CRAPHICS 1109 CENTRAL AN FD 50501 SENATE TRUMAN FUND 5661-FLEUR DR	CAMPAIEN SHIRTS		\$47382
		CK# 2028	SENATE TRUMAN FUND 5661-FLEUR DR FD 50501	CITERATURE		14,00000
		ID# CK#				
		ID#				
		CK#				
		ID#				
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		CK#				
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١		CK#				
•					SUB-TOTAL	\$ 14473.82

THIS BOX APPL	JES TO	CANDIDA	TES' COMMIT	TEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page of	
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TOTAL (if last page of this schedule)

30,713.15

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

i	SCHEDULE	
	В	
	D	MONETARY
	(Rev. 09/97)	EXPENDITURES
		CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

ρ	EDPLE FOI	R BEHLL		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10.01,02	ID# <sub>136</sub> 1 CK# Zo76	WAITT OUTHOUR 1445 5.23.00 PD 50501	BILLBOARD	\$ 5/0 00
10.09.02	CK# 2077	POSTMASTER	POSTAGE	144.80
10,10.02	$\sim$ 010	CALHOUN CO. RECORDERS OFE RUCKHEU COMY 51579	LIST	20.00
16.10.02	2011	GREENE CO RELORDERS OFC. JEFFERSON, IA	CIST	39.00
10.09.02	ID# (1 CK# <sub>2081</sub>	THE MESSENGER 713 CENTRAL FD SOSOI	AD INSERT	224.44
10.08.02	ID# (' CK# 2080	POSTMASTER	POSTAGE	38.00
10.08.02	ID# (1 CK# 2083	WEBSTER CO RECORDER'S OFL FT. DODGE	LISTS	25.00
10.14.02	ID# CK# 122	MESSENGER PRINTING 712-155 AV. S FD 50501	ENIZUO PES	145.75
			SUB-TOTAL	\$ 1147.99

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page	2	of	5
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TOTAL (if last page of this schedule)

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

CON	MITTE	NAME (Must be s	same as on Statement of Organization)		
	PE	OPLE FOR	BEALL		
EXPE	ATE ENDED DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
<i>ዕ</i> ን،	14.02	1D# 1361 -CK#2053	POSTMASTER	POSTAGE	\$ 38.81
08.	Zu .02	ID# 1361 CK# 2061	CAKICSON ENTERPRISE 108 CENTRAL AV. FD SOSOI	PHONE CAROS	42.40
083	30.02	ID# 1 CK# 2062	OFFICE MAX 2920 STI AN S FT, DODLE SUSOI	CAMPUTER SUPPLIES	54.81
0 9.1	6.02	CK# 2063	POSTMASTER	POSTAGE	68.40
09.	13,02	ID# " CK# 2064	MENARDS CK 508.43 3319 54 AUS RETURN 32.33 FD 50501	SIGN MATTRIALS	476.10
04,2	2.02	ID# " CK# 26065	11	ıl.	134.86
04.	23.02	ID# ,, CK# 2066	h	17	87,52
09.	23.02	ID# CK#	11	it	56.58
				SUB-TOTAL	\$009118

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

Page	3_	of	\$

TOTAL (if last page of this schedule)

### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF INDING FORM

COMMITTEE NAME	(Must be same as on	Statement of Organization)
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DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
64.23.02	2069	HOBBY LOBBY 301 S. 29 ST &D SOSO1	SIGN MATERIALS	\$ 19.05
09.24.02	ID#   CK#   Z070	Office MAY 2920-54AVS FD 50501	JHT ONERLY SUPPLIES	25.39
09.24.02	ID# n CK# 207	Į (	ERPIES	87.45
04.24.02	ID# () CK# 2072	POSTMASTER	POSTAGE	489.00
04.2402	ID# <sub>(</sub> ,	11	ч	155.40
09.25.02	ID# (1 CK# 207 4	· (	k .	74.00
10.01.02	ID# <sub>//</sub> CK# 2/2/	JOANN BENU 1928-11.22-125- FD 50501	FOUD + FOUD RELATED SUPPLIES FOR MUDRAISER	177.72
04.27.02	ID# CK# \$075	MENARDS 3319-54 AV.S. FD 50501	SIGN MATERIALS	41.41
			SUB-TOTAL	\$ 1069.42
			TOTAL (if last page of this schedule)	\$

# THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page	4	of	_5

# **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

PEOPLE	FOR	BEALL
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PCUP	CE PUR I	XALL	<u> </u>	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10.14.02	2125	DENCKLAU GRAPHICS SHICENTER ST BARNUM SUSIR	MAUNETIC SIGNS	\$ 58.30
	ск# 2030	CARTER PRINTING- 1734 BILLAND AV DSM 50316	POST CARDS BINTONS	1142.12
07,14.02	CK# 2021	ECONOMY DRINT + GRAPHICS 1109 CENTRAL FD 50501	CAMPAION SHIRTS	79.50
67, 23,02	ID# 11 CK# 2022	SENATE TRUMAN GUND 5661 FLEUR DR DBM 50321	POLLING I MOR SAIARY REIMB.	6000.00
07.24.02		JIFI PRINT 2200 CENTRAL AN FD 50501	VITER ID CARDS	182.97
	CK# 2025	BOB BICKEN POB. 361 CARLOW SI401	PARADE CANDY	37476
08,18.02	XUZ 1	CARTER PRINTING 1739 - E GRAND D8M 503/6	STATIONERY, BUMPER STICKERS	272420
08,16.02	ID# 4 CK# 2026	И	BROCHURES	2500.54
			SUB-TOTAL	\$ 13062.44

TOTAL (if last page of this schedule)

# THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

> Page of

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FUR INSTRUCTIONS.	OFF DAUN UF	FURIN

COMMITTEE NAME (Must be same as on Statement of Organization)	<b>E</b> (Rev. 06/97)	O6/97) IN KIND CONTRIBUTIONS CHECK THIS BOX IF MENDING FORM
FEOPLE FOR BEALL		

	DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
	09.13.02	NEW AMERICAN OPTIMISTS 236 MASSACHUSETTS AVE NE. WASHINGTON DC 20002		PRINT + SHIP LITERATURE	1621.21	
1	04.30.02	IA DENOCRATIC PARTY (10#9098)		POSTAGE + MAIL PRODUCTION	4149.00	
	09.05.02	1SEA - PAC (11) # 6086) 777-3RY ST DSM 50309		MEMBERSHIP DISKETTE	100.00	
	08,01.02	Democratic DARTY (ID#9098) SUBI FLEUR DR DSM 50321		COMPUTER	3 mos @ 164.441mc 493.32	
	08.15.02	MIKE+CADIY JOHNSON 31 TIMBER RIDGE DR FAIRBURY. IL 61739		F000	220.00	V
	08.15.02	IRU + DY ANN FIACA 603 MARGARET ST CALLENDER, IA 50523		FOOD	100,00	V
				SUB-TOTAL	\$ 112 12	

TOTAL (if last page of this schedule)

SCHEDULE

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_\_of \_\_\_\_\_ (for Schedule E)